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CITY OF CHICHESTER

ANNUAL REPORT

ON THE STATE OF THE

PUBLIC HEALTH

OF THE

CITY OF CHICHESTER

For the year 1953

BY

H. MICHAEL AYRES

Medical Officer of Health

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Members of the City Council at 31st December, 1953 :—

Alderman MRS. A. F. EASTLAND, J.P. (*Mayor*)

Councillor W. R. BRAY (*Deputy Mayor*)

Alderman H. U. B. BURDEN

„ T. J. EASTLAND, M.B.E., J.P.

„ J. R. HOBBS, J.P.

„ G. A. R. PURCHASE

„ F. E. WORLEY

Councillor N. BARRY

„ W. BROOKES

„ M. L. EVANS

„ L. E. EVERSLED-MARTIN

„ MRS. J. HOGG

„ A. E. HUMPHRY

„ H. A. MASON

„ C. J. NEWELL

„ D. H. T. M. ROBERTSON-RITCHIE

„ S. H. J. ROTH

„ J. M. SELSBY

„ J. G. SNELLING

„ S. D. SPICER

„ R. O. STEWART

„ E. W. TOZER

„ G. J. WELCH

„ J. P. WHITEHEAD

The Committees chiefly concerned with matters of public health are as follows :—

Committee.	Functions.
(a) Public Health and Housing Committee : (details of whose membership are shown below)	(General public health matters (Housing (Public Mortuary (Public conveniences
(b) Highways Committee :	(Street cleansing (Refuse collection and disposal
(c) Sewerage and Waterworks Committee :	(Sewers (Sewage disposal (Cesspool emptying (Water supply

Public Health and Housing Committee at 31st December, 1953 :—

Alderman MRS. A. F. EASTLAND, J.P. (*Mayor*)

Councillor L. E. EVERSLED-MARTIN (*Chairman*)

Alderman H. U. B. BURDEN

Councillor N. BARRY

„ W. BROOKES

„ M. L. EVANS

„ C. J. NEWELL

„ S. H. J. ROTH

„ J. M. SELSBY

„ G. J. WELCH

PUBLIC HEALTH OFFICERS OF THE CITY

Officers

Other Appointments and Duties

H. MICHAEL AYRES

(Member of the Royal College of Surgeons (Eng.), Licentiate of the Royal College of Physicians (Lond.), Diploma in Tropical Medicine and Hygiene (Camb. Univ.), Diploma in Public Health (Camb. Univ.).)

Medical Officer of Health

Medical Officer of Health, Bognor Regis Urban District ;
Assistant County Medical Officer of Health and School Medical Officer, West Sussex County Council;
Medical Superintendent, Chichester Infectious Disease Hospital.

T. C. WARD

(Certificate of Royal Sanitary Institute and Sanitary Inspectors' Examination Joint Board as Sanitary Inspector, and Certificate of the Royal Sanitary Institute as an Inspector of Meat and Other Foods.)

Chief Sanitary Inspector.

Housing Inspector ;
Inspector under the Prevention of Damage by Pests Act 1949 ;
Inspector under the Public Health (Meat) Regulations.

C. W. CHAPMAN

Chief Clerk

J. SNOWDON

(Certificate of Royal Sanitary Institute and Sanitary Inspectors' Examination Joint Board as Sanitary Inspector, and Certificate of the Royal Sanitary Institute as an Inspector of Meat and Other Foods.)

Additional Sanitary Inspector (*Resigned 8/11/53*)

W. H. J. OSMAN

Shops Inspector (Part-time).

CLERICAL STAFF

Senior Clerk—Housing :

MR. L. J. MARVIN

Assistant Clerks :

MISS C. BARDEN (*Resigned 9/5/53*)

MISS N. NASH (*Resigned 31/7/53*)

MISS I. M. PIERCE (*Appointed 4/8/53*)

MISS B. M. TWEEDY (*Appointed 1/10/53*)

PUBLIC HEALTH DEPARTMENT,
"GREYFRIARS,"
NORTH STREET,
CHICHESTER.

July, 19

To the Chairman and Members of the Public Health
and Housing Committee.

Mr. Mayor and Gentlemen,

I have the honour to present my twelfth Annual Report on the health of the City of Chichester and the work of the Public Health Department during the year 1953. This has been compiled, in accordance with Ministry of Health Circular 1/54, on the lines of the previous year's report.

As regards population, the Registrar-General's mid-year estimate for 1953 of the number of City residents (including non-civilians) of 19,280 shows an increase of 260 over the figure at 30th June, 1952 (19,020). (The provisional 1951 census of the population of the City was 19,110). This increase is accounted for entirely by movement of people into the City area (thus reversing the trend of migration in the previous year) as there was a natural decrease in the population, i.e., the excess of deaths over births, during 1953, of 5, and it has, undoubtedly, been one of the main reasons for the difficulty in securing accommodation in the City, reflected in the number of new applications for Council house accommodation (216) received by the Department in 1953.

Once again, it is pleasing to report that the high standard of health of the City in previous years has been maintained during 1953. The incidence of infectious disease, apart from the customary biennial measles epidemic, has again been low. The birth rate again showed a slight increase over 1952 and, whilst the death rate was markedly higher, this was due entirely to revision of the rules governing transferable deaths, by which, for the first time, deaths of inmates of certain hospitals were included in the City figures. An indication that we are living longer is shown by the increasing proportion of deaths in the higher age-groups—for example, there were 11 deaths during the year at ages of 90 and over, the oldest being 99 years. One of the greatest problems of the aging population to-day is undoubtedly the loneliness which is experienced by many elderly people, especially those without relations or near friends. A number of organizations in the City are dealing energetically with this problem, one being the "Darby and Joan" Club which is run by the W.V.S. Many aged people, though retaining their interest in life, lack the initiative and physical strength to translate inclination into action, and the most palatable tonic that they can have is the satisfaction of knowing that they have friends to help them to add life to their years.

Vital statistics for the year are set out on subsequent pages, but it should be borne in mind, when comparing these with other areas, that, with a relatively small population in the City, wide variations occur in certain rates—particularly that for Infantile Mortality (deaths of infants under one year of age)—when the actual numbers of deaths are low, i.e., under 10. Comparison of these rates with those for other areas or for previous years may, therefore, have little statistical value, and it is suggested that a more accurate picture may be obtained by taking the actual numbers involved, in preference to rates per 1,000 live births.

BIRTHS AND BIRTH RATE.

The number of births during the year showed a slight increase over 1952, respective figures being 271 and 263. *The birth rate per 1,000 population* 14.05, as compared with 13.83 in 1952. In order that due allowance may be made for the differing age and sex distribution of the population in different areas, the Registrar-General supplies an "Area Comparability Factor" for use for the City, so that a more accurate comparison may be made between the City's birth rate and those for England and Wales, and for other areas.

The City birth rate for 1953, when adjusted by this factor, is increased to 5.73 per 1,000 population (5.49 in 1952). For England and Wales the corresponding rate was 15.5 (15.3 in 1952).

The number of illegitimate births for the year (6) again showed a decrease, the figure for 1952 being 8.

DEATHS AND DEATH RATE.

As was explained in the foreword to my report for 1952, new rules governing the transferability (particularly deaths) came into operation on 1st January, 1953. Deaths of inmates of Graylingwell Hospital and of the nursing homes for the chronic sick in the City have, in the past, been treated as *outward transfers*, since their normal place of residence was *outside the City area*. These deaths were, however, *included as City residents* in the estimated figure of the population supplied by the Registrar-General and it was to correct this and other anomalies that the new transferability rules were formulated.

As a result, the number of deaths during 1953 assigned to the City (after allowance has been made for the outward transfer of registered deaths of non-residents and the corresponding inward transfer of deaths of City residents dying in other areas) was 276, compared with 187 in 1952, an increase of 89. It should be noted, however, that during the year a total of 104 deaths occurred in Graylingwell Hospital and the nursing homes for chronic sick in the City, the majority of whom had *been admitted from outside Chichester* but whose deaths were assigned to the City under the new rules. The "crude" (unadjusted for sex and age distribution) death rate for 1953 was 14.31, compared with 9.83 in 1952. When adjusted by means of the "Area Comparability Factor" for deaths in the City, supplied by the Registrar-General, to take into account the high proportion of aged persons in the resident population, the death rate for 1953 was 8.31 (8.45 in 1952). This adjusted rate can then be accurately compared with the figure for England and Wales for 1953 of 11.4 (11.3 in 1952) and with rates for other areas.

It is interesting to note that 73% of the deaths in 1953 were residents aged 65 and over, whilst 46% were aged 75 and over.

Other information regarding deaths is set out below:—

Infantile Mortality.

The number of deaths of infants during the first year of life remained at a low figure, namely 4, compared with 5 in 1952. (The City infantile mortality rate per 1,000 live births was 14.76, compared with 26.8 for England and Wales).

Maternal Mortality.

One maternal death (the first directly attributed to pregnancy or childbirth since 1949) occurred during the year.

(c) **Death Rate from all forms of Tuberculosis.**

Deaths from Tuberculosis showed a *decrease* in 1953 (2), compared with the previous year (4). Both deaths were from non-pulmonary tuberculosis.

The death rate per thousand of the population was 0.10 (0.21 in 1952). For England and Wales, the respective rates were 0.20 (1953) and 0.24 (1952).

(d) **Cancer Death Rate.**

Deaths from cancer during 1953, in common with other areas, showed an increase over the previous year, the respective figures being 49 in 1953 and 40 in 1952.

3. CONTROL OF INFECTIOUS DISEASE.

It is highly satisfactory to note that 1953 was a *year free from any serious outbreaks of infectious disease*. Measles and Whooping Cough accounted for almost all the 448 notifications received during the year and, excluding tuberculosis, *there were no deaths from infectious disease*. In particular, there have been no cases of Diphtheria notified since 1947, which clearly illustrates the success of the immunisation campaign.

Measles notifications during the year numbered 350, as compared with 3 in 1952. (This disease reaches epidemic proportions in 2-year cycles). The outbreak in the City lasted from the middle of January until the beginning of May.

Whooping Cough also showed an increase, 55 cases being notified, against 2 in 1952.

Scarlet Fever notifications increased from 6 in 1952 to 15 in 1953 (1 case later being re-diagnosed as Chickenpox). The disease is now extremely mild in type.

Three cases of **Poliomyelitis** were notified during the year; 2 cases were classified as paralytic and 1 as non-paralytic in type. (In 1952, of the 5 cases notified, 4 were paralytic in type).

There were 11 notifications of **Pneumonia** (13 in 1952) and 9 notifications of **Food Poisoning** (2 in 1952).

4. DIPHTHERIA IMMUNISATION.

Diphtheria immunisation statistics in respect of the City can be found on a later page of this Report, in Section III. The remarkable success of the nation-wide immunisation campaign—clearly shown in the dramatic drop in the numbers of notifications of, and deaths from, diphtheria since the campaign was inaugurated—has, however, engendered a feeling of complacency amongst the general public. Few have seen or heard of a case of diphtheria and the dangers of inadequate, or lack of, protection against the disease are not fully realised until a sharp reminder, in the shape of a sudden outbreak, directs attention again to the campaign. (In recent months, an outbreak in the Midlands resulted in 6 deaths—none of whom had been immunised—in a total of 78 cases).

It cannot be too strongly emphasised that the elimination of this disease is conditional on the maintenance of an adequate level of immunisation.

One hundred and seventy-two children were immunised in the City for the first time during the year, compared with 245 in 1952. In addition, the total number of children under 15 protected by immunisation at the end of 1953, was 3,116, 60 fewer than at the end of the previous year.

The aim of the immunisation campaign is to secure an adequate level of protection and particularly amongst young children—the target being protection for *at least 75%* of babies before their first birthday.

All parents of children are strongly urged to take advantage of the facilities offered to secure protection against diphtheria.

5. HOUSING.

During 1953, 142 new houses were completed by the Council—the highest total since 1948—bringing the total for post-war construction to 732 (of which 582 were permanent houses). *This is a very fine achievement and compares exceedingly well with other housing authorities in West Sussex.*

Although good progress is being made in rehousing families on the Council's housing waiting list, the number of applicants at the end of 1953 was still large (504). Of these, 246 were people living in lodgings in the City and 124 City householders, making a total of 370 applications from *actual residents in the City*. There were, in addition, 58 requiring bungalows or ground-floor flats, being mainly elderly couples or single persons. In the Council's building programme for 1954, however, provision has been made for the construction of suitable accommodation for applicants in this category.

I am indebted to the Committee for their most sympathetic co-operation in the rehousing of persons to whom I have recommended additional points on medical grounds, because good housing plays such an important part in the patient's recovery.

6. INSPECTION AND SUPERVISION OF FOOD.

This work has been carried out by the Chief Sanitary Inspector, Mr. T. C. Ward, with the assistance of Mr. J. Snowdon, the Additional Sanitary Inspector. Good progress was made during the year under review and, in general, ready co-operation was secured from the shopkeepers in the maintenance of satisfactory standards of hygiene in food premises. Full details of this work can be found in Section V of this Report.

7. RODENT CONTROL.

No charge is made for treatment carried out at private dwellings and householders are thus encouraged to notify the department promptly of an infestation by rats or mice, in order that any treatment may be put in hand without delay. Good results were obtained in this work by the use of the latest methods of dis-infestation, as is indicated by the drop in the number of treatments which were found necessary at private premises. The annual test and maintenance treatment of City sewers carried out during the year also gave very satisfactory results.

8. WATER SUPPLY.

The water supplied to the City has once again been of a *very high standard of purity*. Mr. A. N. Burgess, the City Water Engineer, has very kindly furnished me with a report for 1953 on the undertaking, covering, amongst other points, a summary of the results of chemical and bacteriological examination of the water. I receive copies from the Water Engineer of all the reports on water samples, which are taken regularly, and there is close co-operation between the two departments in this and other matters.

As a precautionary measure, in view of the increasing demands on the water undertaking, an improved method of water sterilisation treatment, consisting of super-chlorination, followed by partial dechlorination, was brought into use at Fishbourne Pumping Station on the 11th December, 1953.

9. SEWAGE DISPOSAL.

For some considerable time, concern has been felt by reason of the serious overloading which occurs at peak periods at the Council's Sewage Disposal Works in Appledram Lane. In addition, the City Engineer informs me that examination of some of the City sewers has disclosed faults in the system resulting not only in leakage therefrom, but also considerable infiltration of sub-soil water into the sewers, thus adding to the load at the Sewage Disposal Works.

The sewerage system is now over 60 years old and has been severely strained by reason of new Council and private building and industrial development in the City. The Sewage Disposal Works, which were completed towards the end of the last century, were designed for a population of 10,000—roughly half the City's present population.

The position was first considered just before the war, when a scheme for the reconstruction of the Sewage Works was prepared. A further review was carried out in 1942/43, but, due to hostilities, further action, beyond the design stage of the scheme, had to be deferred until the post-war period.

The Council have now approved the draft scheme for the reconstruction of the Sewage Disposal Works, and it has been submitted to the Ministry for approval. It is hoped that sanction will be forthcoming, so that these urgent works may be put in hand at an early date. Provision has also been made in the Council's programme of capital expenditure, for the repair of certain of the City sewers, where serious leakages have occurred.

GENERAL.

I wish to record my appreciation of the very large amount of excellent work which has been carried out during the year by the Chief Sanitary Inspector Mr. T. C. Ward, his assistant, Mr. J. Snowdon, and the Shops Inspector, Mr W. H. J. Osman.

I also have to record my thanks to the Chief Clerk, Mr. C. W. Chapman and to the other members of the staff of the Public Health Department for their loyal and wholehearted service.

I again wish to express my deep appreciation of the keen interest taken in the health of the City by the Chairman and Members of the Public Health and Housing Committee, and by the Mayor, Aldermen and Members of the Council.

I am extremely indebted to the Town Clerk, Mr. Eric Banks, and the Chief Officers of other departments for their friendly and close liaison and assistance at all times. I am also grateful to local doctors and the members of the general public for their most ready and willing co-operation in matters of public health.

I am, Mr. Mayor and Gentlemen,

Your obedient Servant,

H. M. AYRES,
Medical Officer of Health

TABLE I

GENERAL AND

1914—

Year	Popu- lation	Births		Deaths		Population Natural Increase or Decrease	Infant Mortality		Cancer Deaths	
		No.	Crude Birth Rate†	No.	Crude Death Rate†	No.	No.	Rate	No.	Rate
1914	13110	227	17.31	260	19.83	—33	12	52.86	17	1.2
1915	10240	207	15.78	300	29.59	—93	26	125.60	12	1.2
1916	9962	225	23.52	172	17.25	53	16	71.04	11	1.1
1917	9843	220	20.05	175	17.77	45	11	49.94	22	2.2
1918	11851	181	15.27	187	17.67	—6	11	60.72	18	1.5
1919	12031	205	17.7	172	15.47	33	21	121.95	20	1.6
1920	12200	289	24.3	148	12.8	141	9	44.9	27	2.2
1921	12413	244	19.70	153	12.33	91	15	61.47	14	1.1
1922	12560	235	18.71	148	11.78	87	14	59.57	24	1.9
1923	12680	213	16.79	142	11.19	71	9	42.25	22	1.7
1924	13010	188	14.45	153	11.96	35	7	37.23	19	1.5
1925	13410	186	13.87	142	10.75	44	9	48.38	22	1.6
1926	14090	181	12.84	155	11.15	26	5	27.62	22	1.5
1927	14300	223	15.59	170	12.01	53	8	35.87	30	2.08
1928	13850	198	14.29	190	13.93	8	12	60.60	19	1.3
1929	13760	199	14.46	169	12.47	30	10	50.25	16	1.1
1930	13760	229	16.64	153	11.29	76	10	43.66	29	2.1
1931	13912	205	14.72	144	10.56	61	6	29.26	19	1.3
1932	14180	206	14.52	171	12.05	35	11	53.39	25	1.7
1933	15240	198	12.99	185	12.13	13	10	50.50	29	1.8
1934	15590	236	15.13	173	11.09	63	7	29.66	26	1.6
1935	15770	223	14.14	193	12.23	30	11	49.32	32	2.02
1936	15950	209	13.10	207	12.97	2	2	9.56	38	2.3
1937	16370	239	14.59	167	10.20	72	10	41.84	34	2.07
1938	16460	227	13.79	202	12.27	25	7	30.83	34	2.06
1939	17530	245	14.62	187	10.66	58	12	48.58	24	1.3
1940	18540	241	12.99	202	10.89	39	12	49.79	27	1.5
1941	18270	263	14.39	200	10.94	63	8	30.41	28	1.5
1942	17420	275	15.78	206	11.82	69	12	43.64	32	1.8
1943	16490	308	18.67	220	13.34	88	15	48.77	23	2.0
1944	15880	285	17.95	213	13.47	72	19	66.66	34	2.1
1945	15890	272	17.11	191	12.02	81	6	22.05	35	2.2
1946	16790	301	18.46	223	13.20	87	9	29.03	38	2.3
1947	17120	311	18.16	231	13.49	80	10	32.15	28	1.6
1948	17900	329	18.38	188	10.5	141	3	9.12	33	1.84
1949	18020	301	16.75*	212	11.8*	89	7	23.26	37	2.06*
1950	18230	293	16.07	202	11.08	91	5	17.06	26	1.43
1951	19050	245	12.86	229	12.02	16	4	16.33	38	2.0
1952	19020	263	13.83	187	9.83	76	5	19.01	40	2.1
1953	19280	271	14.05	276	14.31	—5	4	14.76	49	2.54

* These have been calculated according to the civilian (only) population for 1949—1970.

† For explanation see under heading "Deaths" in body of Report.

VITAL STATISTICS

—1953

Pulmonary Tuberculosis Deaths		Death from Zymotic Disease		Scarlet Fever Attack Rate	Diphtheria Attack Rate	No. of inhabited Houses †	New houses erected	Houses erected with State Assistance		Rateable Value ‡	Sum represented by Penny Rate ‡	Year
No.	Rate	No.	Rate				Total	By Council	By Other Person			
7	0.53	3	0.22	3.96	2.7	2699	x	x	x	x	x	1914
14	1.3	10	0.98	6.34	1.8	2699	x	x	x	x	x	1915
15	1.5	1	0.1	4.1	1.6	x	x	x	x	x	x	1916
10	1.01	2	0.2	2.03	2.1	x	x	x	x	x	x	1917
15	1.2	3	0.25	1.3	5.1	x	x	x	x	x	x	1918
10	0.83	5	0.41	6.6	1.5	2802	x	x	x	x	x	1919
12	0.98	4	0.32	0.9	3.1	2805	3	x	x	x	x	1920
15	1.2	1	0.08	0.9	2.4	2845	27	x	x	£59910	£220	1921
13	1.03	Nil	—	1.35	0.8	x	10	x	x	£60462	£220	1922
8	0.63	2	0.15	0.15	0.63	2647	x	x	x	£60905	£230	1923
6	0.46	Nil	—	0.23	0.07	2647	25	6	5	£62130	£240	1924
5	0.37	Nil	—	1.1	0.29	2647	118	48	44	£63474	£240	1925
8	0.56	Nil	—	1.7	1.4	2647	110	58	39	£64884	£252	1926
8	0.55	2	0.13	3.4	2.02	2647	98	62	16	£64827	£257	1927
10	0.72	2	0.14	2.8	1.8	2647	37	Nil	24	£66365	£257/4/8	1928
6	0.41	2	0.14	2.9	0.72	2647	27	Nil	11	£95646	£267/0/11	1929
3	0.21	2	0.14	2.6	0.58	3307	27	Nil	1	£90373	£377/10/2	1930
8	0.57	2	0.14	1.2	0.32	3351	x	x	x	£91898	£358/12/5	1931
5	0.35	Nil	—	0.98	0.56	3402	51	Nil	Nil	£94999	£368/14/3	1932
9	0.59	Nil	—	5.7	0.32	3854	102	Nil	Nil	£97512	£381/3/7	1933
5	0.32	2	0.12	2.5	1.2	4003	120	Nil	Nil	£109863	£429/10/0	1934
6	0.37	6	0.38	3.1	5.6	4148	171	Nil	Nil	£123961	£485/10/11	1935
9	0.56	2	0.12	1.3	1.8	4358	302	Nil	Nil	£127363	£500/11/11	1936
8	0.48	1	0.06	0.85	1.5	4524	183	Nil	Nil	£133036	£527	1937
7	0.42	Nil	—	0.36	0.42	4572	208	Nil	Nil	£140554	£545/6/11	1938
2	0.11	4	0.22	1.54	0.85	4758	Nil	Nil	Nil	£143923	£591/3/7	1939
4	0.22	Nil	—	1.78	0.21	4799	Nil	Nil	Nil	£153486	£594/15/6	1940
4	0.22	1	0.05	2.02	0.38	4277	Nil	Nil	Nil	£156780	£624/15/11	1941
6	0.34	1	0.05	3.15	0.17	4272	Nil	Nil	Nil	£157190	£618/9/11	1942
5	0.30	1	0.06	2.68	0.54	4276	Nil	Nil	Nil	£158383	£648/9/7	1943
6	0.38	6	0.37	4.91	0.12	4239	Nil	Nil	Nil	£159102	£646/10/6	1944
7	0.44	2	0.12	0.62	0.12	4243	6	Nil	Nil	£159936	£647/6/5	1945
4	0.24	Nil	—	0.71	0.47	4589	71	13	50	£159743	£637/19/0	1946
9	0.52	3	0.17	0.29	0.05	4666	87	62	Nil	£162530	£642/13/10	1947
7	0.39	Nil	—	0.34	Nil	4802	227	192	Nil	£160253	£661/3/0	1948
2	0.11	Nil	—	0.44	Nil	5020	137	114	Nil	£168505	£677/10/2	1949
5	0.27	1	0.05	1.37	Nil	5144	38	15	Nil	£171786	£670/6/4	1950
3	0.16	Nil	—	0.10	Nil	5175	88	74	Nil	£174695	£700/0/1	1951
3	0.16	Nil	—	0.31	Nil	5329	96	70	Nil	£179088	£718/18/5	1952
Nil	—	Nil	—	0.73	Nil	5293♀	185	142	Nil	£182626	£728/6/6	1953

† Actual figure at 31st March
 ♀ Actual figure at 31st December
 x Information not available

TABLE II

Vital Statistics of Chichester compared with the
Vital Statistics of the County of West Sussex, 1953

(Comparative figures for 1952 are shown in brackets)

	Urban Districts	Rural Districts	Adminis- trative County	Chichester
Population estimated by Registrar-General	169,500 (168,500)	157,840 (151,100)	327,340 (319,600)	19,280 (19,020)
Number of Live Births	1,970 (2,068)	2,301 (2,109)	4,271 (4,177)	271 (263)
Birth Rate	11.62 (12.27)	14.58 (13.96)	13.05 (13.07)	14.05 (13.83)
Number of Deaths	2,651 (2,514)	1,868 (1,790)	4,519 (4,304)	276 (187)
Death Rate	15.64 (14.92)	11.84 (11.85)	13.81 (13.47)	14.31 (9.83)
Number of Deaths of Infants under 1 year	44 (35)	51 (39)	95 (74)	4 (5)
Infant Mortality Rate per 1,000 Births ...	22 (17)	22 (18)	22 (18)	14.76 (19.01)
Number of Maternal Deaths	3 (2)	2 (2)	5 (4)	1 (Nil)
Maternal Mortality Rate per 1,000 Births	1.48 (0.95)	0.85 (0.93)	1.14 (0.94)	3.6 (Nil)
Number of Deaths from Tuberculosis (Respiratory System)	11 (33)	15 (20)	26 (53)	(Nil) (3)
Death Rate from Tuberculosis (Respiratory System)	0.06 (0.20)	0.10 (0.13)	0.08 (0.17)	(Nil) (0.16)
Number of Deaths from Cancer ...	476 (468)	336 (316)	812 (784)	49 (40)
Death Rate from Cancer	2.81 (2.78)	2.13 (2.09)	2.48 (2.45)	2.54 (2.10)

It will be noted that in the Urban Districts Deaths exceeded Births by 681, whilst in the Rural Districts Births exceeded Deaths by 433. In the Administrative County, as a whole, Deaths exceeded Births by 248. In Chichester Deaths exceeded Births by 5.

STATISTICS FOR ENGLAND AND WALES

Birth Rate	15.5	(15.3)
Death Rate	11.4	(11.3)
Infant Mortality Rate ...	26.8	(27.6)
Death Rate from Tuberculosis (Respiratory System) ...	0.18	(0.21)
Cancer Death Rate	1.99	(1.99)

SECTION I.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

1.—General Statistics

Area in acres	...	...	...	...	...	...	2,873
Population (Census 1931)	...	...	...	...	...	...	13,913
Population (Provisional figure for Census 1951)	...	...	...	...	...	...	19,110
Registrar-General's estimate of resident population (1953)	...	...	...	...	...	...	19,280
Number of inhabited houses at end of 1953, according to Rate Books	...	...	...	...	...	...	5,293
Rateable Value	...	...	(at 31st March, 1953)	...	...	...	£182,626
Sum represented by a penny rate	...	...	(at 31st March, 1953)	...	...	...	£728

2.—Social Conditions

The City is chiefly a residential and administrative centre with the outlying parts agricultural.

The industrial structure is varied and secure, and there are no large industries which might have a prejudicial effect on health.

3.—Extracts from Vital Statistics of the Year

Births :—			Males	Fem.	Total	Birth Rate per 1,000 of the estimated resident population ...	
Live Births—							
Legitimate	...	...	147	118	265	...	14.05
Illegitimate	...	...	4	2	6		
			<u>151</u>	<u>120</u>	<u>271</u>	The figure for England and Wales was	15.5
Still Births—						Rate per 1,000 total (live and still) births	
Legitimate	...	...	2	2	4	...	18.1
Illegitimate	...	...	1	—	1		
			<u>3</u>	<u>2</u>	<u>5</u>		
Deaths :—			114	162	276	Death rate per 1,000 of the estimated resident population ...	14.31
						The figure for England and Wales was	11.4
Total number of deaths of residents occurring in Public Institutions						...	192
(Percentage of total deaths, 69.6)							
Deaths from diseases and accidents of pregnancy and childbirth :—							
From Sepsis	...	...	...	...	...	...	Nil
From other causes	...	...	...	...	...	...	1
Death rate from Maternal causes per 1,000 live and still births						...	3.6
Number of deaths of Infants under one year of age						...	4
Death rate of Infants under one year of age per 1,000 live births						...	14.76
Deaths from Cancer (all ages)			...	...	...	...	49
Deaths from Measles			...	...	...	...	Nil
Deaths from Whooping Cough (all ages)			...	...	...	...	Nil
Deaths from Diarrhoea (under two years)			...	...	...	...	Nil

TABLE III VITAL STATISTICS OF WHOLE DISTRICT DURING 1943-1953

Year	Births					Total Deaths Registered in the District uncorrected	Transferable Deaths			Net Deaths belonging to the District			
	Population	Uncor-rected Numbers	Net		Of Non-Residents Regd. in the District		Of Residents not Regd. in the District	Under 1 year of age		All ages			
			Num-ber	Rate				Num-ber	Rate per 1,000 net Births		Num-ber	Rate	
I	2	3	4	5	6	7	8	9	10	11	12	13	
1943	16,490	237	308	18.67	949	57.55	746	17	15	48.77	220	13.34	
1944	15,880	252	285	17.95	920	57.93	719	12	19	66.66	213	13.47	
1945	15,890	277	272	17.11	1,161	73.06	985	15	6	22.05	191	12.02	
1946	16,790	327	310	18.46	926	55.15	728	15	9	29.03	223	13.20	
1947	17,120	347	311	18.16	878	51.28	672	25	10	32.15	231	13.49	
1948	17,900	307	329	18.38	744	41.56	566	10	3	9.12	188	10.50	
1949	18,020	302	301	16.75	773	43.02	573	12	7	23.26	212	11.8	
1950	18,230	279	293	16.07	787	43.17	600	15	5	17.06	202	11.08	
1951	19,050	248	245	12.86	808	42.10	600	21	4	16.33	229	12.02	
1952	19,020	282	263	13.83	722	38.01	550	15	5	19.01	187	9.83	
1953	19,280	296	271	14.05	667	34.59	406	15	4	14.76	276	14.31	

Note.— This table has been prepared to compare the number of births and deaths registered in the City with the number of births and deaths actually attributable to the City (*i.e.* residents) with the corresponding rates.

"Uncorrected" figures are compiled locally and are the births and deaths which actually occur in the City, including institutions

"Net" figures are supplied by the Registrar General and relate to 'residents' only.

"Rate" unless otherwise stated means the rate per thousand of the population.

BIRTHS

Following the national trend of a rising birth-rate over the past two years, City births during 1953 again showed a slight *increase* over the previous year. Eight more births were registered in 1953 (271), than in 1952 (263), the respective *crude* birth rates per thousand of the population (after deducting births of non-City residents registered in Chichester and adding births of City residents occurring in other areas), being 14.05 for 1953 as compared with 13.83 for 1952.

For the purpose of *more accurate comparison* with statistics for other areas, these rates are adjusted (using the "Area Comparability Factor" for births supplied by the Registrar General, namely, 1.12) to take into account the variations in age and sex distribution in different areas. These adjusted rates, together with comparable figures for England and Wales for the two years, are set out below :—

	<i>Chichester.</i>	<i>England and Wales.</i>
1953	15.73	15.5
1952	15.49	15.3

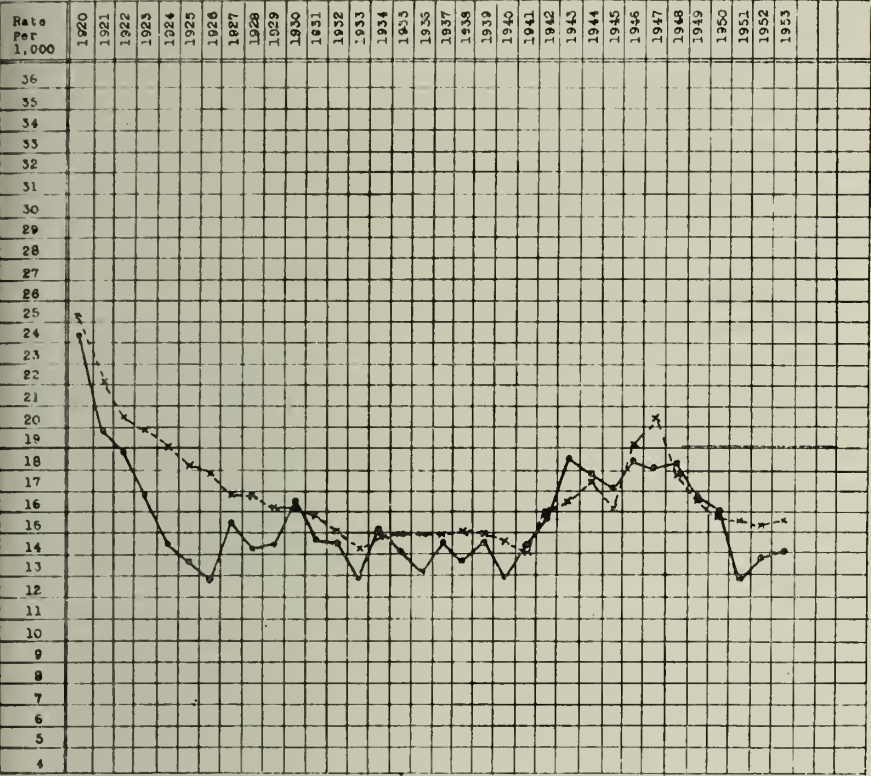
It will be seen, therefore, that the City birth rate is again slightly *above* the national figure (for 1953).

The following table shows births, male and female, and the birth-rates in the City for each year since 1920. These figures are also illustrated visually in graph form overleaf.

Year	Total Births	Males	Females	Crude Birth Rate	No. of males born per 100 females
1920	289	150	139	24.3	107.9
1921	244	120	124	19.70	96.7
1922	235	119	116	18.71	102.5
1923	213	110	103	16.79	106.7
1924	188	109	79	14.45	137.9
1925	186	92	94	13.87	97.8
1926	181	71	110	12.84	64.5
1927	223	124	99	15.59	125.2
1928	198	101	97	14.29	104.1
1929	199	102	97	14.46	105.1
1930	229	127	102	16.64	124.5
1931	205	95	110	14.72	86.3
1932	206	109	97	14.52	112.3
1933	198	105	93	12.99	112.9
1934	236	115	121	15.13	95.0
1935	223	122	101	14.14	120.7
1936	209	108	101	13.10	106.9
1937	239	120	119	14.59	100.8
1938	227	131	96	13.79	136.4
1939	245	128	117	14.62	109.4
1940	241	129	112	12.99	115.9
1941	263	146	117	14.39	124.8
1942	275	136	139	15.78	97.8
1943	308	159	149	18.67	106.6
1944	285	154	131	17.95	117.5
1945	272	122	150	17.11	81.3
1946	310	161	149	18.46	108.0
1947	311	155	156	18.16	99.3
1948	329	172	157	18.38	109.6
1949	301	144	157	16.75	91.7
1950	293	149	144	16.07	103.5
1951	245	128	117	12.86	109.4
1952	263	135	128	13.83	105.5
1953	271	151	120	14.05	125.8

CHART SHOWING THE BIRTH RATES OF CHICHESTER SINCE

1920



The dotted line represents the rate for England and Wales.

DEATHS.

As explained earlier in this Report, new rules governing the statistical transferability of deaths, etc., which came into operation at the beginning of the year, have resulted in a considerable increase in the number of deaths assigned to the City during 1953. The 50% increase over the figure for 1952 (276, as compared with 187) comprises deaths of inmates of institutions now treated as their normal place of residence.

It will be seen from the table on page 18 analysing the deaths which occurred in hospitals and public institutions, that the two premises in the City chiefly affected by this change in procedure were Graylingwell Hospital and Cawley Nursing Home, which have been classified by the Registrar-General as a "Mental Hospital" and a "Nursing Home for Aged and Chronic Sick," respectively.

The *crude* death rate per thousand of the population was 14.31 in 1953, as compared with 9.83 for the preceeding year.

For comparison with the death rates for other areas or for England and Wales as a whole, the Registrar-General has supplied, as with births, an Area Comparability Factor. These factors are used for adjustments to the *crude* rates (compiled from the net figures of births and deaths of City residents) to counteract the low crude birth rate and high crude death rate which are normal in residential districts favoured by invalids and retired elderly people, into which category Chichester falls.

The population of such areas shows, as a result, a preponderance in the higher age groups, so that the births are fewer and deaths higher than would be the case in a district where the composition of age groups is more evenly balanced.

It will be noted from Table IV overleaf that 73% of the deaths of City residents were of persons aged 65 and over, whilst 46% were aged 75 and over. There were 11 deaths of persons aged 90 and over, the oldest being 99.

The adjusted death rate for the City for 1953 is 12.31, compared with 8.45 in the previous year and a figure of 11.4 for England and Wales for 1953.

A table is appended below which shows comparative rates for the past three years and, in particular, the effect of the change in procedure explained in the first paragraph above.

Year	City Death Rates		Death Rate for England and Wales
	Crude Rate	Adjusted Rate	
1951	12.02	9.3	12.5
1952	9.83	8.45	11.3
1953	14.31	12.31	11.4

TABLE IV

Deaths of "Residents" during the year 1953, classified by age and cause.

Causes of Death	Net Deaths at the subjoined ages of "Residents" whether occurring within or without the District								Total		GRAND TOTAL, All Ages
Column 1	Under 1 year	1—4	5—14	15—24	25—44	45—64	65—74	75 and upwards	Males	Females	
2	3	4	5	6	7	8	9	10	11	12	
1. Tuberculosis, respiratory ...	—	—	—	—	—	—	—	—	—	—	—
2. Tuberculosis, other forms ...	—	—	—	—	—	2	—	—	2	—	2
3. Syphilitic disease ...	—	—	—	—	—	—	1	—	—	1	1
4. Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—
5. Whooping Cough ...	—	—	—	—	—	—	—	—	—	—	—
6. Meningococcal infections ...	—	—	—	—	—	—	—	—	—	—	—
7. Acute poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—
8. Measles ...	—	—	—	—	—	—	—	—	—	—	—
9. Other infective and parasitic diseases ...	—	—	—	—	—	—	—	—	—	—	—
10. Malignant neoplasm, stomach	—	—	—	—	—	1	1	—	1	1	2
11. Malignant neoplasm, lung, bronchus ...	—	—	—	—	1	5	1	—	6	1	7
12. Malignant neoplasm, breast	—	—	—	—	—	4	3	1	—	8	8
13. Malignant neoplasm, uterus	—	—	—	—	—	1	1	1	—	3	3
14. Other malignant and lym- phatic neoplasms ...	—	1	—	—	2	7	12	7	18	11	29
15. Leukaemia, Aleukaemia ...	—	—	—	—	—	—	1	—	1	—	1
16. Diabetes ...	—	—	—	—	—	1	1	—	—	2	2
17. Vascular lesions of nervous system ...	—	—	—	—	—	8	8	15	15	16	31
18. Coronary disease—angina ...	—	—	—	—	—	7	10	12	18	11	29
19. Hypertension with heart disease ...	—	—	—	—	1	1	1	1	—	4	4
20. Other heart disease ...	—	—	—	—	—	8	13	47	18	50	68
21. Other circulatory disease ...	—	—	—	—	—	4	3	6	8	5	13
22. Influenza ...	—	—	—	—	—	1	1	2	—	4	4
23. Pneumonia ...	—	—	—	—	—	1	6	22	7	22	29
24. Bronchitis ...	—	1	—	—	—	2	1	1	4	1	5
25. Other diseases of respiratory system ...	—	—	—	—	—	—	—	—	—	—	—
26. Ulcer of stomach and duo- denum ...	—	—	—	—	—	1	2	—	1	2	3
27. Gastritis, enteritis and diarrhoea ...	—	—	—	—	—	—	1	—	—	1	1
28. Nephritis and nephrosis ...	—	—	—	—	—	1	2	1	4	—	4
29. Hyperplasia of prostate ...	—	—	—	—	—	—	1	1	2	—	2
30. Pregnancy, childbirth, abor- tion ...	—	—	—	—	1	—	—	—	—	1	1
31. Congenital malformations ...	—	—	—	—	—	—	—	—	—	—	—
32. Other defined and ill-defined diseases ...	4	—	—	1	—	3	6	6	6	14	20
33. Motor vehicle accidents ...	—	—	1	—	—	—	—	1	1	1	2
34. All other accidents ...	—	—	—	—	1	—	—	1	1	1	2
35. Suicide ...	—	—	—	—	1	1	—	1	1	2	3
36. Homicide and operations of war ...	—	—	—	—	—	—	—	—	—	—	—
TOTAL ...	4	2	1	1	7	59	76	126	114	162	276

WARD DISTRIBUTION OF DEATHS

Ward			Estimated Population	Deaths		Total
				Males	Females	
East	...	...	7,190	52	88	140
West	...	...	6,770	30	36	66
South	...	...	5,320	32	38	70
TOTAL			19,280	114	162	276

The East Ward includes Graylingwell Hospital inmates, deaths of whom during 1953 numbered 84—see below.

The *principal causes* of death from 1944 to 1953 inclusive are shown in the following table:—

Cause of Death	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953
Tuberculosis, respiratory	6	7	4	9	7	2	5	3	3	—
Tuberculosis, other forms	2	1	2	—	1	2	—	1	1	2
Pneumonia	6	3	9	12	10	18	7	15	17	29
Bronchitis and other diseases of the respiratory system	13	10	13	11	7	7	11	11	7	5
Disease of heart and blood vessels ...	70	74	80	81	62	79	99	92	69	114
Vascular lesions of the nervous system	22	21	26	24	32	22	24	20	28	31
Cancer (malignant and lymphatic neoplasms)	34	35	38	28	33	37	26	38	40	49

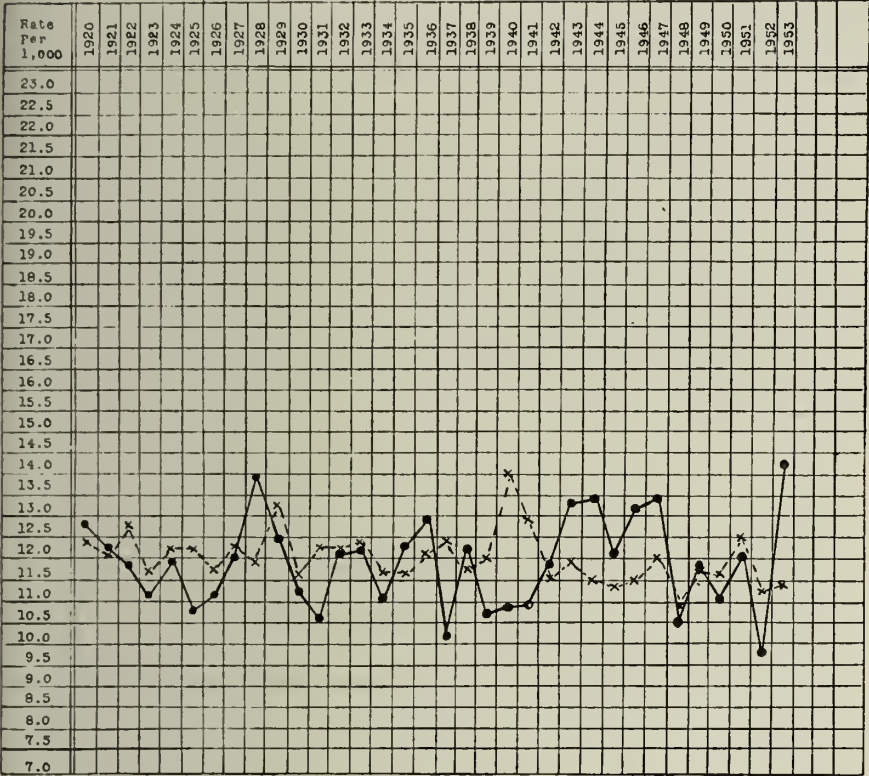
DEATHS IN HOSPITALS AND PUBLIC INSTITUTIONS

During the year, 192 deaths of Chichester residents occurred in hospitals and public institutions.

The figures given below refer to deaths of persons *normally residing in Chichester*. They do not represent the total number of persons who have died in those hospitals and institutions which are situated in the City area.

Hospital or Institution	No. of Deaths	Percentage of Total Deaths
Graylingwell Hospital	84	30.4
Royal West Sussex Hospital	27	9.8
St. Richard's Hospital	50	18.1
Aldingbourne Sanatorium	1	0.4
Cawley Nursing Home	20	7.2
Guy's Hospital, S.E.	1	0.4
St. Mary's Hospital, Portsmouth ...	1	0.4
Royal United Hospital, Bath	1	0.4
Whittington Hospital, Highgate ...	2	0.7
Wray Nursing Home, Havant	2	0.7
Zachary Merton Maternity Home, Rustington	3	1.1
TOTALS ...	192	69.6%

CHART SHOWING THE DEATH RATES OF CHICHESTER SINCE 1920



The dotted line represents the rate for England and Wales

INFANT MORTALITY

It is very gratifying to be able to record that the number of infant deaths in the City during the year 1953 was *remarkably low*. In fact only 4 deaths of infants under one year of age were recorded as compared with 5 in the previous year. This results in an Infant Mortality Rate (the death rate of infants under one year of age per thousand live births) for the year 1953 of 14.76, as compared with 19.01 for the year 1952. This rate is *very much lower* than the rate for England and Wales for 1953 (26.8).

However, as mentioned in the introduction to my report, when considering statistics in respect of an area such as the City of Chichester which has a relatively small population, it must be borne in mind that a slight variation in the number of deaths etc. is reflected disproportionately in the rates per thousand of the population. This is particularly true with Infant Mortality and the Registrar General has asked that attention be drawn to this fact. It is suggested that a more accurate comparison with previous years can be made by comparing the actual numbers as opposed to the rates per thousand live births.

The table appended below gives an analysis of the infant deaths, by age and cause, which occurred in the City of Chichester during the year under review.

TABLE V
Infant Mortality, 1953

Cause of Death	Actual Age		Total		Grand Total
	8 Hours	2 Days	Male	Female	
Atelectasis	1	1	—	2	2
Prematurity	—	2	1	1	2
TOTALS ...	1	3	1	3	4

Net City births, 271 (Legitimate, 265 ; illegitimate, 6)

Net City deaths under one year of age, 4 (legitimate, 4 ; illegitimate —).

NEO-NATAL MORTALITY.

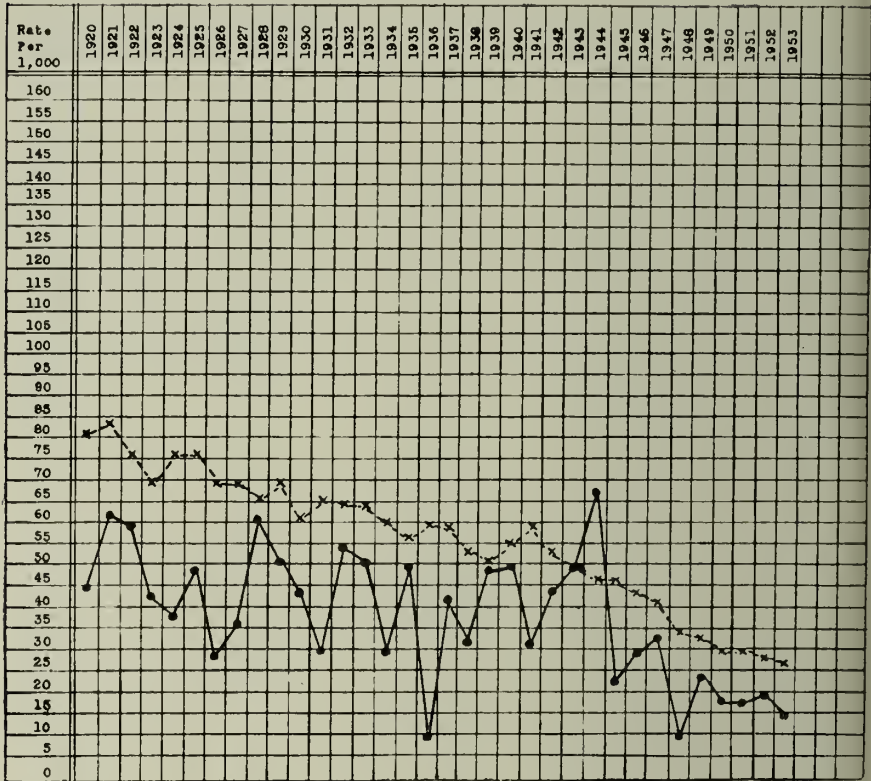
Four deaths (1 male, 3 female) of infants during the *first 4 weeks of life* occurred during the year under review (1 more than in 1952). In all four cases, death was due to natural causes. The neo-natal mortality rate per 1,000 total live births is therefore 14.76, (11.4 in 1952) which compares with a total number of such deaths of 12,086 and a rate of 17.7 in respect of England and Wales for 1953.

INFANT MORTALITY

The total number of deaths under one year was 4, or 14.76 per 1,000 live births.

Year	No. of Infant deaths	Rate per 1,000 births	Percentage of total deaths at all ages	Infant Mortality rate in England and Wales
1920	9	44.9	6.0	80
1921	15	61.47	9.8	83
1922	14	59.57	9.4	77
1923	9	42.25	6.3	69
1924	7	37.23	4.5	75
1925	9	48.38	6.3	75
1926	5	27.62	3.2	70
1927	8	35.87	4.7	69
1928	12	60.60	6.3	65
1929	10	50.25	5.9	70
1930	10	43.66	6.5	60
1931	6	29.26	4.1	66
1932	11	53.39	6.4	65
1933	10	50.50	5.4	64
1934	7	29.66	4.0	59
1935	11	49.32	5.7	57
1936	2	9.56	0.9	59
1937	10	41.84	5.9	58
1938	7	30.83	3.4	53
1939	12	48.58	6.4	50
1940	12	49.79	5.9	55
1941	8	30.41	4.0	59
1942	12	43.6	5.8	49
1943	15	48.7	6.8	49
1944	19	66.66	8.9	46
1945	6	22.05	3.1	46
1946	9	29.03	4.0	43
1947	10	32.15	4.3	41
1948	3	9.12	1.6	34
1949	7	23.26	3.3	32
1950	5	17.06	2.5	29.8
1951	4	16.33	1.7	29.6
1952	5	19.01	2.7	27.6
1953	4	14.76	1.4	26.8

CHART SHOWING INFANT MORTALITY PER 1,000 BIRTHS IN CHICHESTER SINCE 1920



The dotted line represents the rate for England and Wales.

MATERNAL MORTALITY.

One maternal death occurred towards the end of 1953, this being the first death attributed directly to pregnancy or child-birth since 1949.

The maternal mortality rate per 1,000 total (live and still-) births for the City was 3.6. For England and Wales, the figure was 0.76 and for the administrative County of West Sussex, 1.14.

CANCER.

Under this classification are grouped all deaths registered as due to cancer, malignant and lymphatic neoplasms, epithelioma, sarcoma, etc.

The total number of deaths in the City during 1953 from all forms of cancer was 49, giving a death rate of 2.54 per 1,000 of the population, as compared with the (provisional) rate of 1.99 per 1,000 of the population for England and Wales for that year.

Seventy-one per cent of the deaths due to cancer were of persons of 60 years of age and over.

The mortality from cancer for the years 1943/1953 inclusive is given below :—

Years	Deaths		Total	Death rate per 1,000 population
	Males	Females		
1943	8	15	23	2.0
1944	13	21	34	2.1
1945	13	22	35	2.2
1946	19	19	38	2.2
1947	15	13	28	1.6
1948	19	14	33	1.8
1949	17	20	37	2.1
1950	12	14	26	1.4
1951	18	20	38	2.0
1952	23	17	40	2.1
1953	25	24	49	2.5

When comparing the total number of deaths from cancer with the figures for previous years, any increase or decrease in the total population of the City must be taken into account.

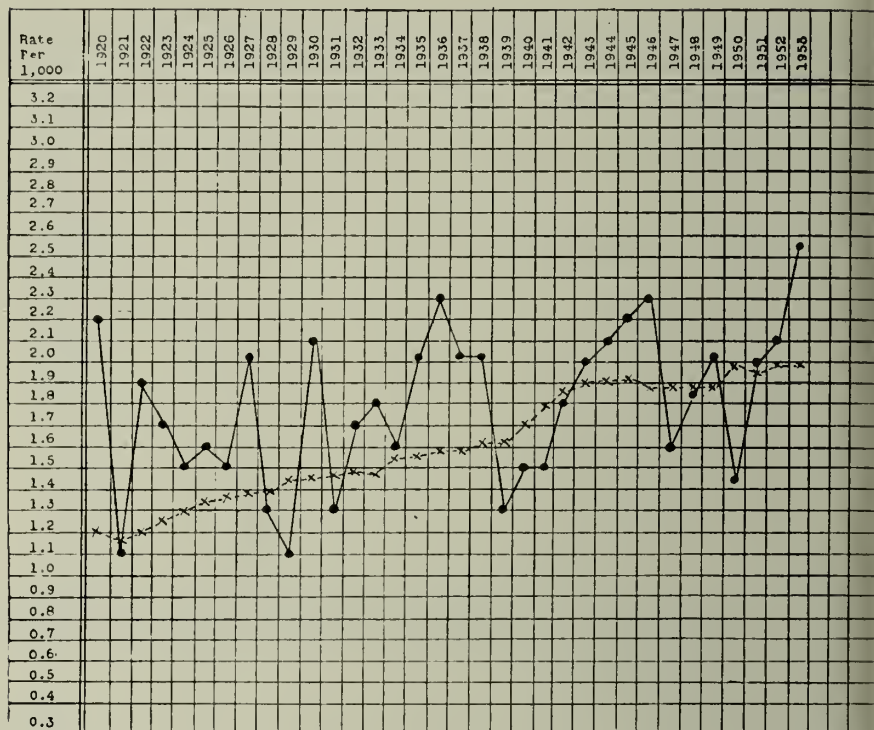
In the following table, the sites of fatal cancer for both sexes are shown for the year 1953 :—

(1) Buccal Cavity & Pharynx (lip, tongue, etc.)		(2) Lung Bronchus		(3) Stomach Liver		(4) Intestines, rectum, peritoneum		(5) Uterus		(6) Breast		(7) Other Sites		(8) Total	
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
4	—	6	1	4	4	4	3	—	3	—	8	7	5	25	24

Deaths from Cancer for the year 1953, showing the actual ages, divided into male and female, were as follows :—

	Age at Death in Years																													
	1	40	42	49	50	53	55	56	57	59	60	61	63	64	66	67	68	69	70	71	72	73	74	75	77	78	80	85	86	Total
Males	1	1	1	—	—	1	1	—	1	1	2	1	—	3	1	—	1	1	1	1	2	—	—	2	—	2	—	—	1	25
Females	—	1	—	1	1	1	1	1	—	1	—	—	1	1	1	1	—	1	2	—	—	2	4	1	1	—	1	1	—	24
TOTAL	1	2	1	1	1	2	2	1	1	2	2	1	1	4	2	1	1	2	3	1	2	2	4	3	1	2	1	1	1	49

CHART SHOWING DEATH RATES FROM CANCER IN CHICHESTER SINCE 1920



The dotted line represents the rate for England and Wales

SECTION II.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

Notifiable Infectious Diseases.

The following infectious diseases are, by law, notifiable to the Medical Officer of Health :—

Cholera	Plague
Diphtheria (including Membranous Croup)	Acute Primary Pneumonia
Dysentery	Acute Influenzal Pneumonia
Encephalitis (Acute) (Infective and Post-Infectious)	Polio-myelitis (Acute) (Paralytic and Non-Paralytic, including also Acute Polio-Encephalitis)
Enteric (Typhoid and Paratyphoid) Fever	Puerperal Pyrexia
Erysipelas	Relapsing Fever
*Food Poisoning or Suspected Food Poisoning	Scarlatina or Scarlet Fever
Malaria	Smallpox
Measles	Tuberculosis (Respiratory, Meninges and C.N.S., and other forms)
Meningococcal Infection	Typhus Fever
Ophthalmia Neonatorum	Whooping Cough

Leprosy also became a notifiable infectious disease in 1951 but in this instance notifications have to be sent direct by the Medical Practitioner to the Chief Medical Officer at the Ministry of Health ; information would be available locally whenever necessary.

*Details of notifications of **food poisoning** for the year under review may be found in Section V of this report under " Inspection and Supervision of Food."

During the year, the Public Health (Infectious Diseases) Regulations 1953 were brought into operation (on 1/4/53). In general substance and form they re-enact the superseded Public Health (Infectious Diseases) Regulations of 1927, that is to say they require notification of malaria, dysentery, acute primary pneumonia and acute influenzal pneumonia. (which are not covered in the definition of notifiable diseases in Section 343, Public Health Act, 1936) and provide for preventive steps to be taken against the spread of certain diseases specified in the Fourth Schedule to the regulations. This schedule has now been framed, however, as compared with the First Schedule of the 1927 Regulations, to accord with the present shape and working of the health services ; and, in Part III, it differs from the corresponding part of the earlier regulations in some important respects concerning prevention of food poisoning. In making these changes referred to below, the Minister of Health has taken into consideration the Report of the Catering Trade Working Party on Hygiene in Catering Establishments, as well as suggestions made by Medical Officers of Health.

The provisions about action to be taken by local authorities and Medical Officers of Health against the risk of food poisoning, applied under the old regulations to " enteric fever and dysentery." They now apply to " typhoid fever, paratyphoid fever or other salmonella infections, dysentery and staphylococcal infection likely to cause food poisoning." (The phrase " typhoid fever, paratyphoid fever or other salmonella infections " comprises the diseases

previously described as " enteric fever "). Under the 1927 regulations the steps prescribed could only be taken in relation to a person suffering from the disease in question, and for the purpose of preventing such a person from continuing to work in an occupation connected with the preparation and handling of food or drink. The *new regulations go further*. They provide *for action to be taken* not only as regards a person *suffering* from the disease in question, but also a person shown to be a *carrier* of the disease ; and a person in either class may now be prevented not only from *continuing to work in an occupation connected with food and drink*, but also from *entering* such an occupation.

It is felt that, by widening the scope of action for local authorities, these Regulations should go far towards the effective control and ultimate elimination of outbreaks of food poisoning.

Infectious diseases which are *not notifiable* are German Measles, Mumps, Chicken-pox and Influenza. The notifications received from head teachers when children are absent, suffering from or believed to be suffering from, these illnesses (and the notifiable infectious diseases) are of considerable assistance in gaining information as to the incidence of such diseases amongst the school population of the City.

Routine enquiries to trace the source of infection, etc., are made by the Public Health Department officials immediately on receipt of a notification of infectious disease. Advice is given to parents as to home nursing, exclusion from schools, etc., (both of patients and contacts for the prescribed periods), disinfection (carried out, where required, by the Department's disinfectors either terminally or on removal of the patient to hospital) and general measures to prevent the spread of infection.

Copies of notifications of infectious disease are, under the National Health Service Acts, 1946-1948, forwarded to the County Medical Officer within 48 hours of their receipt. In addition, weekly returns are made to the County Medical Officer and the Registrar-General.

TABLE VI

The following table gives details of cases (other than Tuberculosis) notified during 1953, showing in the age analysis columns, the final figures after any necessary re-diagnosis :—

Diseases	Originally Notified	AGE ANALYSIS (after any necessary correction of diagnosis)									
		Under 1	1 to 2	3 to 4	5 to 9	10 to 14	15 to 24	25 to 44	45 to 65	65 plus	Total
Dysentery (Sonne) ...	1	—	—	—	—	—	1	—	—	—	1
Erysipelas	3	—	—	—	—	—	—	1	2	—	3
Food Poisoning	9	—	—	—	—	—	6	2	1	—	9
Measles	350	6	53	102	164	11	4	5	5	—	350
Meningococcal Infection	1	—	1	—	—	—	—	—	—	—	1
Pneumonia (Acute primary and influenzal)	11	—	1	1	1	—	—	5	2	1	11
Poliomyelitis (Acute paralytic)	2	—	—	—	1	—	—	1	—	—	2
Poliomyelitis (Non-paralytic)	1	—	—	—	—	—	—	—	1	—	1
Scarlet Fever	15	—	—	—	11	2	1	—	—	—	14
Whooping Cough ...	55	2	5	14	29	2	—	—	—	1	55
								2			
TOTALS	448	8	60	117	206	15	12	16	11	2	447

TABLE VII
WARD DISTRIBUTION OF
NOTIFIABLE INFECTIOUS DISEASES
(excluding Tuberculosis)

Diseases	Wards			TOTAL
	EAST (Estimated population: 7,190)	WEST (Estimated population: 6,770)	SOUTH (Estimated population: 5,320)	
Dysentery (Sonne) ...	1	—	—	1
Erysipelas ...	—	1	2	3
Food Poisoning ...	—	9	—	9
Measles ...	128	103	119	350
Meningococcal Infection ...	1	—	—	1
Pneumonia (Acute Primary and Influenzal) ...	3	4	4	11
Poliomyelitis (Acute paralytic) ...	1	—	1	2
Poliomyelitis (Non-paralytic) ...	—	1	—	1
Scarlet Fever ...	5	4	6	15
Whooping Cough ...	10	18	27	55
TOTALS ...	149	140	159	448

The table below gives details of City residents suffering from an infectious disease *who were admitted to the Infectious Disease Hospital* during the year 1953.

The majority were admitted either after diagnosis had been made at the out-patient departments of the local general hospitals, or because unsatisfactory home conditions prevented their being isolated satisfactorily.

Disease	No. of cases admitted to Hospital	Remarks
Tonsillitis	5	Diagnosed as Tonsillitis.
?Diphtheria	1	
Mumps	1	
Measles	11	
Measles and Pneumonia ...	1	
Measles Contact	1	1 case diagnosed as Chicken Pox.
Influenza	1	
?Scarlet Fever	3	
Chicken Pox	2	1 case diagnosed as Dermatítis.
Erysipelas	2	
Whooping Cough and Gastro-Enteritis	1	1 case provisionally diagnosed as Fibrositi 2 cases diagnosed as Paralytic in type 1 being transferred to St. Richard's Hospital
Gastro-Enteritis	1	
Acute Anterior Poliomyelitis	3	
Total	33	

POLIOMYELITIS.

During 1953, 4 notifications of City residents suffering from Acute Poliomyelitis ("Infantile Paralysis") were received. One was withdrawn immediately, as the patient, on admission to hospital, was found to be suffering from a leg injury and not poliomyelitis. Of the remaining 3 cases, two were classified as paralytic and 1 as non-paralytic in type.

The disease was comparatively mild in 2 cases (1 paralytic, 1 non-paralytic) who both made satisfactory recoveries but unfortunately the third patient died on 3/4/54 after a long illness (respiratory paralysis occurred soon after the onset, necessitating removal to the "iron lung" at St. Richard's Hospital).

Investigations are made immediately notifications are received and a full report is sent to the County Medical Officer of Health. In addition, to assist in research on the disease, details of each case are forwarded to the Medical Research Council.

DIPHTHERIA

For the sixth successive year, *no cases of Diphtheria were notified.*

The following table shows the number of cases, deaths and fatality per cent, since 1917. I have commented elsewhere in this Report on the success of the diphtheria immunisation campaign (which is obvious from the undermentioned figures) and the danger of complacency as a result of the present freedom from this disease.

Year	Population	Cases	Deaths	Fatality per cent
1917	9,843	21	2	9.5
1918	11,851	61	3	4.9
1919	12,031	19	3	15.8
1920	12,200	38	1	2.6
1921	12,413	30	1	3.3
1922	12,560	10	—	—
1923	12,680	8	1	12.5
1924	13,010	1	—	—
1925	13,410	4	—	—
1926	14,090	20	—	—
1927	14,300	29	1	3.4
1928	13,850	25	1	4.0
1929	13,760	10	1	10.0
1930	13,760	8	—	—
1931	13,920	5	—	—
1932	14,180	8	—	—
1933	15,240	5	—	—
1934	15,590	19	1	5.3
1935	15,770	89	6	1.1
1936	15,950	29	1	3.4
1937	16,370	26	1	3.8
1938	16,460	7	—	—
1939	17,530	15	2	13.3
1940	18,540	4	—	—
1941	18,270	7	—	—
1942	17,420	3	—	—
1943	16,490	9	—	—
1944	15,880	2	—	—
1945	15,890	2	—	—
1946	16,790	8	—	—
1947	17,120	1	—	—
1948	17,900	0	—	—
1949	18,020	0	—	—
1950	18,230	0	—	—
1951	19,050	0	—	—
1952	19,020	0	—	—
1953	19,280	0	—	—

Scarlet Fever.

Fifteen cases were notified during the year, of these, 1 case was subsequently diagnosed as Chicken-pox ; the attack rate was 0.73 per 1,000 of the population.

The following table shows the number of cases, deaths, and the fatality per cent, since 1917.

Year	Population	Cases	Deaths	Fatality per cent
1917	9,843	20	—	—
1918	11,851	15	—	—
1919	12,031	8	—	—
1920	12,200	11	—	—
1921	12,413	12	—	—
1922	12,560	17	—	—
1923	12,680	2	—	—
1924	13,010	3	—	—
1925	13,410	15	—	—
1926	14,090	25	—	—
1927	14,300	49	—	—
1928	13,850	39	—	—
1929	13,760	40	—	—
1930	13,760	37	1	2.7
1931	13,920	18	1	5.5
1932	14,180	14	—	—
1933	15,240	88	—	—
1934	15,590	39	—	—
1935	15,770	49	—	—
1936	15,950	22	1	4.5
1937	16,370	14	—	—
1938	16,460	6	—	—
1939	17,530	27	—	—
1940	18,540	33	—	—
1941	18,270	37	—	—
1942	17,420	55	—	—
1943	16,490	44	—	—
1944	15,880	78	—	—
1945	15,890	10	—	—
1946	16,790	12	—	—
1947	17,120	5	—	—
1948	17,900	6	—	—
1949	18,020	8	—	—
1950	18,230	25	—	—
1951	19,050	2	—	—
1952	19,020	6	—	—
1953	19,280	14	—	—

Two of the cases of Scarlet Fever were admitted to the Chichester Infectious Disease Hospital; the remaining twelve cases were nursed at home.

Measles.

Deaths since 1930 are as follows :—

Year	No. of Cases	Total Deaths	Death Rate
1930	Not Notifiable	2	0.14
1931	"	—	—
1932	"	—	—
1933	"	—	—
1934	"	—	—
1935	"	—	—
1936	"	2	0.12
1937	"	—	—
1938	"	1	0.06
1939	"	—	—
1940	380	—	—
1941	207	—	—
1942	220	—	—
1943	119	—	—
1944	10	—	—
1945	314	—	—
1946	121	—	—
1947	117	—	—
1948	107	—	—
1949	141	—	—
1950	2	—	—
1951	341	—	—
1952	3	—	—
1953	350	—	—

Whooping Cough

The mortality record since 1930 is as follows :—

Year	No. of Cases	Deaths	Death Rate
1930	Not Notifiable	—	—
1931	"	1	0.07
1932	"	1	0.07
1933	"	—	—
1934	"	—	—
1935	"	—	—
1936	"	—	—
1937	"	—	—
1938	"	—	—
1939	"	—	—
1940	109	—	—
1941	47	1	0.05
1942	31	—	—
1943	16	—	—
1944	64	2	0.12
1945	11	—	—
1946	31	—	—
1947	20	—	—
1948	87	—	—
1949	18	—	—
1950	15	—	—
1951	34	—	—
1952	2	—	—
1953	55	—	—

TUBERCULOSIS.

Twenty-two cases were added to the register during the year 1953, as follows, compared with 17 in 1952 :—

	Pulmonary		Non-Pulmonary		Total for 1953	Comparative figures for 1952
	M.	F.	M.	F.		
<i>New Cases</i> —(i.e. notified for the first time)	4	10	2	1	17	15
<i>Cases transferred from other areas</i> —(as the family moved into the City) ...	2	3	—	—	5	2
TOTALS	6	13	2	1	22	17

Of these, 3 males (1 pulmonary and 2 non-pulmonary), were diagnosed only after post-mortem examination, the cases not having been notified prior to death. These 3 are therefore also included in the removals from the register set out below.

Cases removed from the Register during 1953 numbered 14, as follows, as compared with 15 in 1952 :—

	Pulmonary		Non-Pulmonary		Total	Comparative figures for 1952
	M.	F.	M.	F.		
Deaths	2	—	2	—	4	2
Recovered	1	2	1	—	4	5
De-notified (after revised diagnosis) ...	—	—	—	—	—	2
Transferred out of City	1	4	—	1	6	6
Lost sight of (i.e. moving to another area without notifying the Authority concerned)	—	—	—	—	—	—
TOTALS	4	6	3	1	14	15

It will be noted that the total deaths (4) is two more than the number shewn for deaths from Tuberculosis in Table IV on page 17. The two pulmonary cases shewn in the above table were assigned by the Registrar-General to a cause of death other than tuberculosis.

Cases of Tuberculosis on the Register at 31st December, 1953

	Pulmonary			Non-Pulmonary			Total (Pulmonary and non-pulmonary)
	M.	F.	Total	M.	F.	Total	
(a) Residents of Institutions	6	7	13	—	—	—	13
(b) <i>Ward Allocation of City residents</i> :—							
East Ward	14	16	30	2	4	6	36
West Ward	15	14	29	2	2	4	33
South Ward	14	12	26	2	1	3	29
TOTAL	49	49	98	6	7	13	111

Treatment

The conditions under which persons suffering from Tuberculosis are living can play an important part in their recovery and the housing situation of the 111 cases which remained on the Tuberculosis Register at the end of the year under review was as follows :—

Patients actually living in Council Houses	...	...	...	41
Residents of Institutions within the City	...	...	...	13
Patients living in privately owned property and who have not applied for rehousing in Council Houses	...	...	...	51
Patients who require alternative accommodation and who have applied for a Council House	...	...	...	6
				111

Good progress has been made in the past few years in *rehousing persons suffering from tuberculosis* and particularly during 1953 when 11 were rehoused. I am deeply indebted to the City Council for their most willing assistance in this matter.

The number of patients from the City *treated at Sanatoria* during the year under review, is given below :—

<i>Admitted to</i>				<i>Male</i>	<i>Female</i>	<i>Total</i>
Aldingbourne House	...	...	...	8	9	17
Bognor Regis Annexe	...	...	...	2	—	2
				—	—	—
Totals				10	9	19
				—	—	—

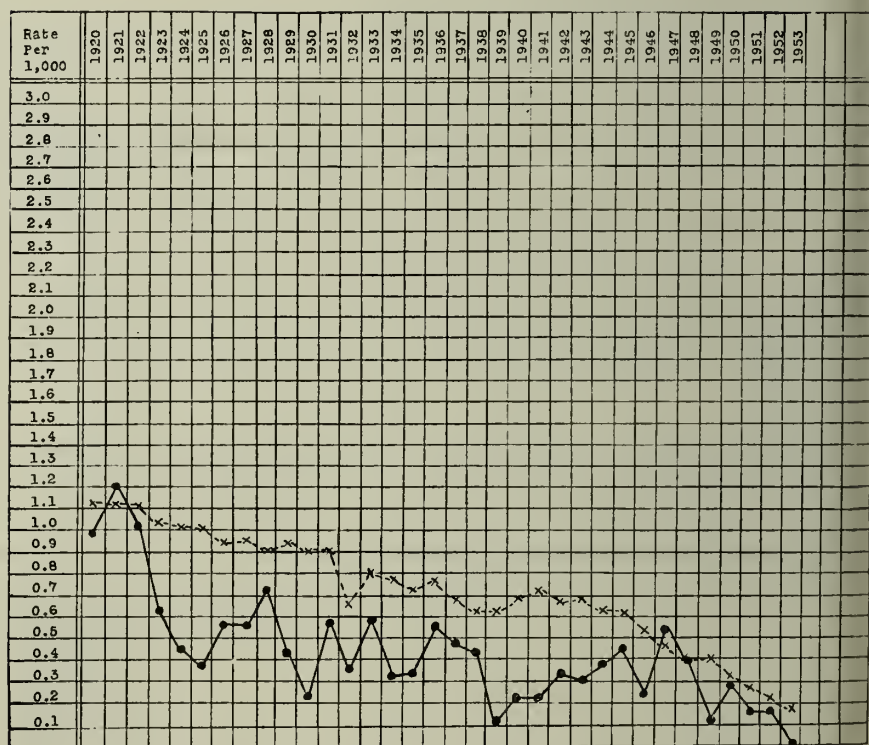
The ages of the new, and fatal cases in 1953 are shown below :—

Age Periods	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year	—	—	—	—	—	—	—	—
1-5 years	—	—	—	—	—	—	—	—
5-15 years	—	—	—	—	—	—	—	—
15-25 years	—	2	—	1	—	—	—	—
25-35 years	3	6	—	—	—	—	—	—
35-45 years	—	2	—	—	—	—	—	—
45-55 years	1	3	2	—	1	—	2	—
55-65 years	1	—	—	—	—	—	—	—
65 years and upwards	1	—	—	—	1	—	—	—
TOTAL	6	13	2	1	2	—	2	—

Statement showing mortality from Tuberculosis (Pulmonary and Non-Pulmonary) in Chichester and in England and Wales, since 1937. (Figures as supplied by the Registrar General).

Year	Deaths under Five Years of age		Total Deaths		Tuberculosis (all forms) Death Rate per 1,000 of population	
	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Chichester	England and Wales
1937	—	—	8	2	0.61	0.69
1938	—	—	7	—	0.42	0.63
1939	—	—	2	3	0.28	0.63
1940	—	—	4	1	0.27	0.69
1941	—	1	4	5	0.49	0.72
1942	1	1	6	2	0.45	0.65
1943	—	—	5	2	0.42	0.66
1944	—	—	6	2	0.50	0.62
1945	—	—	7	1	0.50	0.61
1946	—	—	4	2	0.35	0.54
1947	—	—	9	—	0.52	0.54
1948	—	—	6	1	0.39	0.51
1949	—	1	2	2	0.22	0.45
1950	—	—	5	—	0.27	0.36
1951	—	—	3	1	0.21	0.32
1952	—	—	3	1	0.21	0.24
1953	—	—	—	2	0.10	0.20

CHART SHOWING DEATH RATES FROM PULMONARY TUBERCULOSIS, SINCE 1920



The dotted line represents the rate for England and Wales.

SECTION III.

GENERAL PROVISION OF HEALTH SERVICES IN THE CITY

1. NATIONAL ASSISTANCE ACTS, 1948 and 1951.

The Ministry of Health has requested details of any action taken during the year 1953 under Sections 47 and 50 of the principal Act. Details are as follows :

(a) **Section 47** (as amended by Section 1 of the National Assistance (Amendment) Act, 1951)

This section empowers the City Council to apply to a Court of Summary Jurisdiction for an Order authorising the removal to suitable premises of persons who are in need of care and attention.

No action was necessary under this section during 1953.

(b) **Section 50**

A duty is placed upon the City Council to arrange for the burial of persons dying within the City (except in Hospitals) where it appears that no suitable arrangements are being made.

No action was necessary under this section during 1953.

2. SERVICES PROVIDED BY THE WEST SUSSEX COUNTY COUNCIL.

(a) **Ambulance Service and Hospital Car Service.**

Acting as agents for the County Council, the St. John Ambulance Brigade operates the ambulance and hospital car service.

The Hospital Car Service is primarily intended for persons who have an appointment at a hospital, clinic, etc., and who are not fit to travel by public transport, or public transport is not available.

(b) **Maternity and Child Welfare.**

(i) **Expectant and Nursing Mothers.**

Ante- and Post-natal Clinics are held at the *Health Centre, Chapel Street, Chichester*, under the control of the West Sussex County Council. Clinics are held on Thursdays (all day) and expectant mothers receive advice from doctors or the nurses in attendance on all matters concerned with their pregnancy, or on any ensuing complications which may arise.

Relaxation classes for expectant mothers (first established in the City in March, 1948) are proving popular. Sessions are held weekly at the Health Centre.

Maternity outfits are available free of cost at the *Health Centre*.

The West Sussex County Council employs a staff of qualified midwives and operates an efficient domiciliary midwifery service.

In cases where General Practitioners consider hospital treatment advisable they make arrangements direct with the Hospital Management Committee for their patients' admission.

Arrangements for the admission to hospital in other cases, e.g. on the grounds of unsatisfactory home conditions are referred to the West Sussex County Council for investigation.

The County Council have made arrangements with the Chichester Diocesan Moral Welfare Association to care for unmarried mothers and their children.

(ii) **Young Children.**

Child Welfare Clinics are held at the Chichester Health Centre, Chapel Street, Chichester, twice weekly on Tuesdays and Fridays. Advice is given by the doctors or nurses in attendance on matters of health, infant feeding and the management of babies.

Arrangements have been made for the provision of National Dried Milk, Vitamins, etc. A number of proprietary baby foods at cost, or reduced price are available on medical advice.

(iii) Statistics.

The following statistics show the *total attendances*, etc., at the ante- and post-natal clinics and at the child welfare clinic during 1953. These statistics include the attendances made by persons from the urbanised area around the City.

(a) *Ante-natal Clinic*

Number of expectant mothers who attended clinics	...	...	...	...	426
Number of attendances made	...	...	...	...	1,367

(b) *Post-natal Clinic*

Number of mothers who attended clinics	...	...	...	...	226
Number of attendances made	...	...	...	...	256

(c) *Child Welfare Clinic.*

Number of children under 5 years of age who attended	...	...	...	...	517
Number of attendances made	...	...	...	...	3,372

(d) *Relaxation Classes*

Number of attendances made	346
----------------------------	-----	-----	-----	-----	-----

(c) School Clinics.

A *Minor Ailments Clinic* is held weekly in the Chichester Health Centre Chapel Street, a Medical Officer attending fortnightly sessions.

During the year, 271 children attended the clinic, making 1,059 attendances. Appointments are made with an Ophthalmic Surgeon for children suffering from defective vision, and arrangements are made where necessary with St. Richard's Hospital and the Royal West Sussex Hospital for the operative treatment of tonsils and adenoids.

Arrangements are also made for the treatment of children suffering from *crippling defects, ear defects and speech defects.*

An *Orthopaedic Clinic* is held at Chichester Health Centre.

A *Nutrition Clinic* is held at the Chichester Health Centre fortnightly where mothers are advised regarding the health of children suffering from malnutrition. Vitamin C and Adexolin Tablets are available for such children. During the year 153 children attended the clinic, making 342 attendances.

(d) Health Visiting.

Health visitors are available to give advice on the health and training of young children and the care of persons suffering from illness.

They also give advice on the preservation of health, precautions to be taken against the spread of infection, and on other aspects of social welfare work.

(e) Home Nursing.

An efficient Domiciliary Nursing Service is operated by the West Sussex County Council, who supply a staff of qualified nurses.

The services of a general nurse are provided on the recommendation of a doctor to any home requiring such service, on application to the general nurse concerned.

(f) **Health Education**

Arrangements are made in conjunction with the County Medical Officer, for the display, at the Health Centre, Chapel Street, of an Exhibition Stand supplied by the Central Council for Health Education. The undermentioned topics were displayed on the Exhibition Stand, each for a period of one week, and appropriate leaflets were available for the public, in holders fitted at the front of the stand :—

Cafe and Canteen Hygiene.
Breast Feeding.

(g) **Prevention of Illness, Care and After-care.**

Tuberculosis—A domiciliary tuberculosis service is maintained by the West Sussex County Council (the responsibility for provision of a tuberculosis consultant service was transferred to the Regional Hospital Board as from 5th July, 1948). A Chest Clinic is held every Tuesday morning, with an additional clinic for contacts only on the afternoon of the first Friday in each month, at Aldingbourne House Sanatorium, near Chichester, where X-ray facilities exist. The Chest Physician at the Sanatorium, who is on the Regional Hospital Board's staff, acts as consultant to the County Council's tuberculosis service and is in attendance at these clinics. His services are placed at the disposal of local medical practitioners in any case where they desire a specialist's opinion.

The County Council have arranged for certain of their duties with regard to the care and after-care of tuberculosis patients to be carried out by the Sussex Rural Community Council, one of whose Committees was set up in Chichester. Cases referred to them by the Chest Physician are visited by their organisers or representatives, and they have given valuable help in the way of provision of beds, bedding, clothes, extra nourishment, domestic help in the house, and the boarding-out of child contacts.

Patients discharged from Hospital.—Two Care Almoners, appointed in January, 1950, conduct a domiciliary welfare service in the County area, in the follow-up of patients discharged from hospital and in the carrying out of social welfare work amongst invalids generally, including tuberculosis patients.

(h) **Home Help Service.**

The Women's Voluntary Service has undertaken, on behalf of the County Council, the organisation of the Home Help Service. When the supply of Home Helps permits, assistance is given to households where there are, for instance, maternity cases, illness, young children (where the mother is away or ill), aged or infirm persons etc. Applications for such domestic assistance should be accompanied by the recommendation of a doctor, nurse or midwife, and should be made to the Women's Voluntary Service Area Organiser, based in the City. A charge, according to the applicant's means, is made for the service, except where precluded by financial hardship.

(i) Immunisation against Diphtheria.

Sessional arrangements are made for this protective inoculation to be carried out at schools and at the Health Centre, where necessary. In addition under an arrangement made with the County Council, immunisation can be carried out by general practitioners at their surgeries.

During 1953, 172 children were immunised against diphtheria, whilst, in addition, 297 children received reinforcing injections (usually just prior to, or just after, their commencing school attendance) to supplement the protection given by their initial immunisation at an earlier age. The table below gives details of the ages of children who received either primary or reinforcing injections during 1953.

	AGES :							
	(i) at date of final injection (as regards(A))							
	(ii) at date of reinforcing injection (as regards (B))							
	Under I	I	2	3	4	5-9	10-14	Total
(A) Number of children who completed a full course of <i>primary</i> immunisation during 1953	19	110	13	4	7	17	2	172
(B) Number of children who received a secondary (reinforcing) injection (subsequent to primary immunisation at an earlier age) during 1953	—	—	—	—	11	254	32	297

The number of children in the City who, at 31st December, 1953, have completed a course of immunisation *prior to that date and since 1st January 1939*, is as follows :—

Age (at 31/12/53) :	Under 1	1-4	5-9	10-14	Total under 15
Year of Birth :	1953	1952-1949	1948-1944	1943-1939	
Last complete course of injections (whether primary or booster) in					
(A) 1949-1953	3	620	1002	331	1956
(B) 1948 or earlier	—	—	333	827	1160
TOTAL	3	620	1335	1158	3116

The figures for children *below school age* who have been immunised are set out in the various age groups as under :—

Age (at 31/12/53)	Under 1	1	2	3	4	Total (under 5)
Year of Birth :	1953	1952	1951	1950	1949	
	3	97	140	186	197	623

There are two points in the above statistics which will be given further attention. It should be noted that the total number of children immunised for the first time during 1953 was only 172, compared with 245 in 1952. The total number of children under 15 protected by immunisation at the end of 1953 was 3,116, as compared with 3,176 at the end of the previous year.

National Statistics for Diphtheria since 1940 are given below. They reveal the success of the Diphtheria Prophylaxis Scheme. Both the number of deaths and the number of cases in 1953 *are the lowest ever recorded*.

During the ten-year period 1931-1940 the average number of original notifications was about 55,300 per annum throughout England and Wales.

Diphtheria—National Statistics

Year	Deaths	Cases originally notified	Corrected Notifications
1941	2,641	50,797	—
1942	1,827	41,404	—
1943	1,371	34,662	—
1944	934	29,949	23,199
1945	722	25,246	18,590
1946	472	18,283	11,986
1947	244	10,465	5,609
1948	156	8,034	3,575
1949	84	4,971	1,890
1950	49	2,833	962
1951	33	1,983	664
1952	32	1,427	376
1953	24	1,034	267

(j) Vaccination against Smallpox.

Arrangements have been made for Vaccination against Smallpox to be carried out by the General Practitioners, at their surgeries and in addition sessional arrangements can be made at the Health Centre should the need arise. *Vaccination is on a voluntary basis.*

3. MENTAL HEALTH.

Through the kind co-operation of the Medical Superintendent of Graylingwell Hospital, Dr. J. Carse, the following notes have been made available concerning the mental health services, in advance of the publication of his annual report covering 1953.

(a) Out-Patients' Clinics.

The Royal West Sussex Hospital, Chichester, has a clinic every Thursday at 2.30 p.m. Graylingwell Hospital also has an Out-Patients' Clinic, which is by appointment, and patients can arrange for consultations in the evening or at weekends if necessary.

Appointments for new patients can be made by application to the Almoner of the hospital at which they wish to attend.

(b) Extra-Mural Units.

It was not found profitable to continue the use of the small number of beds earmarked at the Royal West Sussex Hospital for patients requiring treatment of a purely psychiatric nature. With the accommodation now available at Summersdale Hospital, the admission for treatment of non-statutory patients can be arranged without any legal formality whatever.

(c) Public Relations.

The importance of public relations work is again stressed in the report, the main object being to keep the public fully informed of the psychiatric services available and to encourage them to seek advice and treatment promptly. Many talks and lectures were given to a variety of groups of people and facilities were afforded for the hospital to be visited. As a result, Dr. Carse feels confident that Graylingwell and the aims and practice of psychiatry are no longer the terrifying mysteries they used to be, and that the majority of the public in the surrounding area have a good understanding of the true nature of mental illness and what is being done for it.

4. HOSPITAL FACILITIES.

The City of Chichester is situated in the area administered by the South West Metropolitan Regional Hospital Board, and the General Hospitals in the City and the Chichester Infectious Diseases Hospital form part of a group of eight hospitals managed by the Chichester Group Hospital Management Committee. Your Public Health Committee Chairman and Medical Officer of Health are members of this Committee.

Graylingwell Hospital has its own Hospital Management Committee.

Details of the Hospitals serving the City are as follows :—

(a) **General Hospitals.**

Royal West Sussex Hospital, Broyle Road.	Accommodation 202 beds.
St. Richard's Hospital, Spitalfield Lane.	Accommodation 400 beds.

(b) **Mental Hospitals.**

Graylingwell Hospital, College Lane.	Accommodation 1,177 beds.
Summersdale Hospital, College Lane	Accommodation 80 beds.

(c) **Infectious Disease Hospitals.**

(i) **General Cases.**

Chichester Infectious Disease Hospital, Spitalfield Lane. Accommodation 44 beds and 4 cots. (16 actually available).

(ii) **Smallpox Cases.**

Joyce Green Hospital, Dartford, Kent.

This Hospital will receive cases of smallpox from the City and arrangements for the admission of cases have to be made by the County Medical Officer of Health.

The Ministry of Health has formed a panel of consultants covering the various areas and their services can be obtained on application by the Medical Officer of Health. The County Medical Officer of Health is to be informed immediately, whenever this step has been taken.

(iii) **Cases of Tuberculosis.**

There is a Sanatorium for the treatment of cases at Aldingbourne, near Chichester, with accommodation for 70 patients and an annexe situated at Bognor Regis where there are 50 beds.

Cases of thoracoplasty are received at King Edward VII Sanatorium, Midhurst, and St. Richard's Hospital, Chichester.

(iv) **Venereal Disease.**

Residents in the County may attend the following clinics :—

Brighton

Royal Sussex County Hospital, Eastern Rd., Kemp Town.	Men :	Mondays, Thursdays and Saturdays, 1.30 p.m. to 4.30 p.m.
	Women :	Tuesdays, 1.30 p.m. to 4.30 p.m. Thursdays and Saturdays, 10 a.m. to 1 p.m.

Portsmouth.

St. Mary's Hospital (Ward B 9).	Men :	Tuesdays and Thursdays, 10 a.m. to 5 p.m.
	Women :	Mondays, 5 p.m. to 7 p.m. Wednesdays 2 p.m. to 4 p.m. Fridays 10 a.m. to 12 noon.

Worthing

The Hospital,
Lyndhurst Road.

Men : Wednesdays, 4.30 p.m. to 5.30
 p.m. Fridays, 5.30 p.m. to
 6.30 p.m.

Women : Wednesdays, 2 p.m. to 4 p.m.
 Fridays, 3 p.m. to 5 p.m.

Mr. D. G. Martin, the Surgeon Superintendent of St. Richard's Hospital, Chichester, has again furnished me with details of the work carried out during the year at the Treatment Centre opened at the Hospital in May, 1952.

In 1953, the Centre dealt with 28 new patients, including 6 who had commenced treatment elsewhere. Total attendances for the year were 263. During the year, 19 patients were discharged from further attendance, 3 transferred to other Centres for treatment on leaving the district and 1 ceased to attend.

The Centre continues to serve a fairly wide area of the County, as previous to its opening there had been no facilities for treatment available between Portsmouth and Worthing.

There is a weekly session on Wednesdays from 6 p.m. to 7 p.m.

SECTION IV.

HOUSING

Houses provided by the City Council.

Further excellent progress has been made by the City Council in their efforts to relieve the housing problem in the City.

During the year under review, 142 new Council houses were completed, this being the highest yearly total since 1948. The total number of houses completed in the post-war period (since 1945) is, therefore, 732, of which 682 were permanent houses and 50 prefabricated bungalows.

A further 72 houses were under construction at the end of 1953 and arrangements were being made for the placing of further contracts to cover the 1954 building programme to ensure continuity.

It is a matter for regret, however, that restrictions have been placed by the Government on the number of Council houses to be erected in 1954, the allocation for the year being 80.

The Council's programme of new construction to make up the figure includes 24 bungalows and 12 2-bedroom flats (in blocks of 4). The bungalows and ground-floor flats will go some way towards meeting the pressing requirements of elderly people, etc., in the Council's 'C' Category, to which I drew attention in my Report for 1952.

In addition to the new houses completed during the year, 17 houses became vacant and the total number rehoused during 1953 was, therefore, 159.

Although, from the figures of applicants on the Council's housing list given below, it will be seen that striking progress has been, and is being, made in the rehousing programme, future action under existing and new legislation as regards the clearance and redevelopment of sub-standard houses in the City will undoubtedly affect the rate at which such progress continues.

Another problem which is affecting rehousing is the reflection of increased building costs in the higher rents which must now be charged for new Council houses. In some cases, these are beyond the means of applicants who have hitherto paid low (controlled) rents for their old houses. Their rehousing is having to be deferred until suitable cheaper-rented houses become available for re-letting. This factor must be taken into consideration when the rehousing of the occupants of sub-standard properties is dealt with.

During 1953, the Council completed two blocks of flats, 16 in all, comprising 8 one-bedroom flatlets and 8 3-bedroom maisonettes, for letting at "economic," i.e., unsubsidised, rents. The one-bedroom flatlets, all on the ground floor, were allocated either to elderly couples or single persons, the majority of whom suffered from some physical disability.

The Council has also had under consideration for some time the case of applicants who have been on the housing list for several years but whose rehousing has had to be deferred in view of the more urgent needs of later applicants without a separate home and living under very overcrowded conditions.

At the time of writing this Report, a start has been made on the rehousing of these old applicants, by allocating to them a proportion of the new houses becoming available, the balance going to the housing of applicants in the normal way.

Details of applicants for Council house accommodation

	At 1st January, 1953	At 31st December, 1953
(A) Applicants living in Lodgings		
(i) Residing in the City	290	246
(ii) Residing outside but working in the City ...	42	35
(iii) Residing and working outside the City ...	37	18
	— 369	— 299
(B) Applications from Householders.		
(i) Residing in the City	137	124
(ii) Residing outside but working in the City ...	34	20
(iii) Residing and working outside the City ...	8	3
	— 179	— 147
(C) Applications from Elderly People who require Bungalows	46	58
	594	504

The following tables show the different types of Council Houses erected, and under construction at 31st December, 1953, according to roads, in the order that they were erected:—

(a) Erected Pre-1940

Situation	Year Erected	Type				Grand Total
		Parlour	Non- Parlour	Semi- Bunga- low	Bunga- low	
Pound Farm Road ...	1920	22	—	—	—	22
Appledram Lane** ...	1923	12	—	—	—	12
Adelaide Road ...	1924	20	24	—	—	44
Albert Road** ...	1924	—	—	8	8	16
Lewis Road ...	1925	—	44	—	—	44
Kingsham Road ...	1925	16	52	—	—	68
Alexandra Road ...	1926	12	—	—	—	12
St. James's Road ...	1930	—	18	—	—	18
St. James's Square ...	1930	—	54	—	—	54
Kent Road ...	1934	—	31	—	—	31
St. Pancras ...	1934	—	2	—	—	2
High Street ...	1934	—	2	—	—	2
Spitalfield Lane ...	1935	—	20	—	—	20
St. James's Square ...	1936/37	—	4	—	—	4
Florence Road ...	1936/37	—	8	—	—	8
Gilmore Road ...	1936/37	—	22	—	—	22
Oving Terrace ...	1936/37	—	18	—	—	18
Albert Road ...	1937/38	—	16	—	—	16
Clay Lane ...	1937/38	—	8	—	—	8
Frederick Road ...	1937/38	—	10	—	—	10
High Street ...	1937/38	—	2	—	—	2
St. Paul's Road ...	1937/38	—	6	—	—	6
Bramber Road ...	1938/39	—	34	—	—	34
Cherry Orchard Road ...	1938/39	—	8	—	—	8
TOTAL ...		82	383	8	8	481

**Transferred to City Council when boundary was extended in 1933.

b) Erected during post-war period (1945-1953)

Situation	Year erected	Erected 1945/52				Erected during 1953				Under construction at 31/12/53				Grand Total
		Parlour	Non-Parlour*	Bungalows and Flats	Total	Parlour	Non-Parlour*	Bungalows and Flats	Total	Parlour	Non-Parlour*	Bungalow and Flats	Total	
Swanfield Drive♀	1945/46	—	—	50	50	—	—	—	—	—	—	—	—	50
Eastland Road	1946/47	12	—	1	13	—	—	—	—	—	—	—	—	13
Mumford Place	1946/47	14	—	4	18	—	—	—	—	—	—	—	—	18
Cherry Orchard Road	1947/49	12	—	—	12	—	—	—	—	—	—	—	—	12
Exton Road	1947/49	70	—	2	72	—	—	—	—	—	—	—	—	72
Hay Road	1947/49	48	—	4	52	—	—	—	—	—	—	—	—	52
Caverner Place	1947/49	14	—	4	18	—	—	—	—	—	—	—	—	18
Swanfield Drive	1947/49	26	—	—	26	—	—	—	—	—	—	—	—	26
Greenfield Road	1947/49	24	—	—	24	—	—	—	—	—	—	—	—	24
Blandford Road	1947/49	10	—	—	10	—	—	—	—	—	—	—	—	10
Bradshaw Road	1947/49	12	—	—	12	—	—	—	—	—	—	—	—	12
Castleman Road	1947/49	28	—	—	28	—	—	—	—	—	—	—	—	28
Chatfield Road	1947/49	24	—	—	24	—	—	—	—	—	—	—	—	24
Fanning Road	1947/49	20	—	—	20	—	—	—	—	—	—	—	—	20
Story Road	1947/49	10	—	—	10	—	—	—	—	—	—	—	—	10
Dallaway Road	1949	8	—	—	8	—	—	—	—	—	—	—	—	8
Kingsham Ave.	1949/50	6	33	2+8†	49	—	—	—	—	—	—	—	—	49
Hardham Road†	1950/51	—	—	4	4	—	—	—	—	—	—	—	—	4
St. Wilfrid Road	1950/53	9	2	—	11	—	—	—	—	—	—	—	—	11
Seville Road	1950/53	—	—	24† +2	26	—	—	—	—	—	—	—	—	26
Sherborne Road	1950/54	13	2	1	16	—	35	—	35	18	—	—	18	69
Langton Road	1950/53	—	12	—	12	—	4	—	4	—	—	—	—	16
Oliver Whitby Road	1950/54	26	24	1	51	—	14	—	14	—	4	—	4	69
Sherlock Avenue	1952/53	4	4	16	24	5	4	8	17	—	—	—	—	4
Barton Road	1952/54	—	—	—	—	20	—	20	—	11	—	11	—	3
Hilary Road	1952/53	—	—	—	—	12	—	12	—	—	—	—	—	12
Hannah Square	1952/54	—	—	—	—	24	—	24	—	7	—	7	—	31
Lower Close	1952/53	—	—	—	—	—	16	16	—	—	—	—	—	16
John Arundel Road	1953/54	—	—	—	—	—	—	—	—	18	—	—	18	18
Barlow Road	1953/54	—	—	—	—	—	—	—	—	14	—	—	14	14
TOTAL		390	77	123	590	5	113	24	142	50	22	—	72	804

Notes :

- ♀ Prefabricated Bungalows—
- * These non-parlour type houses have a Kitchen-Diningroom
- † Shops with Flats over
- ‡ Flats

SUMMARY

Showing all Dwelling Houses and Flats owned by the City Council.					
Pre 1940 Council Houses	...	...	...	...	481
Post 1945 Council Houses	...	...	...	...	732
Miscellaneous Flats and Houses	...	...	...	...	64

1,277

HOUSING STATISTICS

The following shows the work carried out during the year by the Chief Sanitary Inspector, Mr. T. C. Ward, and his Assistant, Mr. J. Snowden, in respect of privately-owned dwellinghouses :—

1. Inspection of dwelling-houses during the year :—

(1) (a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ...	215
(b)	Number of inspections made for the purpose ...	798
(2) (a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932 ...	Nil
(b)	Number of inspections made for the purpose ...	Nil
(3)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	4
(4)	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation ...	92

2. Remedy of defects without service of formal notices :—

	Number of unfit or defective dwelling-houses rendered fit during the year as a result of informal action by the local authority under the Public Health or Housing Acts ...	85
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3. Action under Statutory Powers :—

(i) REPAIRS.

(A) *Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 :—*
No action was taken during the year.

(B) *Proceedings under Public Health Acts :—*

(1)	Number of dwelling-houses in respect of which statutory notices were served requiring defects to be remedied ...	7
(2)	Number of dwelling-houses in which defects were remedied after service of statutory notices :—	
(a)	By owners ...	5
(b)	By local authority in default of owners ...	Nil

(ii) DEMOLITION AND CLOSING ORDERS.

(A) *Housing Act, 1936.*

(1)	Number of dwelling-houses in respect of which Demolition Orders were made (under Section II) ...	6
(2)	Number of dwelling-houses demolished as a result of formal or informal procedure (under Section II) ...	4
(3)	Number of dwelling-houses where undertakings under Section II not to re-let for human habitation were given by the owner ...	3
(4)	Number of dwelling-houses closed as a result of such undertakings ...	3
(5)	Parts of buildings closed (under Section 12) ...	Nil

(B) *Housing Act, 1949.*

(1)	Closing Orders made (under Section 3 (1)) ...	Nil
(2)	Demolition Orders determined and Closing Orders substituted (under Section 3 (2)) ...	Nil

(C) **Local Government (Miscellaneous Provisions) Act, 1953.**

(1)	Closing Orders made (under Section 10 (1)) ...	Nil
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4. Housing Act, 1936—Overcrowding.

(a)	(i)	Number of dwellings overcrowded at the end of the year (1953)	1
	(ii)	Number of families dwelling therein	...	...	...	...	...	1
	(iii)	Number of persons dwelling therein	...	...	...	...	...	13
(b)		Number of new cases of overcrowding reported during the year	...	...	...	...	...	6
(c)	(i)	Number of cases of overcrowding relieved during the year	...	...	...	...	...	6
	(ii)	Number of persons concerned in such cases	...	...	...	...	...	28

SECTION V.

INSPECTION AND SUPERVISION OF FOOD.

Food Poisoning.

With the change in the eating habits of the public since 1939 and the marked trend towards communal feeding in school, factory and staff canteens, involving the greatly-increased use of processed, re-heated and made-up food dishes, the dangers from outbreaks of food poisoning have increased to an alarming extent. Statistics given by the Registrar-General of the numbers of notifications of this illness which were received in recent years show clearly the serious nature of this increase, and it should be stressed that for every case notified, there may be several, either mild in type or not specifically diagnosed, which are not brought to light by notification.

In 1951, 5,797 cases of food poisoning were notified in England and Wales. In 1952, the figure was 5,885 but in 1953, nearly twice as many (10,374) notifications were received.

In order that immediate steps can be taken to trace the cause of an outbreak and control its spread, it is of paramount importance that early notification of the occurrence (*or suspected occurrence*) of a case of food poisoning be given to the Medical Officer of Health and efforts made for the retention of suspicious food and/or specimens (vomit, faeces, etc.) from patients, so that early laboratory investigations can be carried out to trace the cause of the illness.

The Chichester Corporation Act, 1938, and the Food and Drugs Act, 1938, have made it a duty of Medical Practitioners to notify to the Medical Officer of Health *cases, or suspected cases*, of food poisoning.

During 1953, an outbreak of food poisoning of a fairly mild type occurred amongst the staff of one of the general hospitals in the City. Some 20 individuals were involved, all of whom recovered satisfactorily, 9 notifications of food poisoning being received. Laboratory examination of the suspected meal, of which all involved partook, together with specimens of faeces and vomit and rectal swabs from the patients, failed to isolate the causative organism.

Milk.

As part of the scheme to ensure that ultimately all milk sold by retail in the country is "specially designated," the Minister of Food announced, on 4th November, 1953, that he proposed to make an order under Section 23 of the Food and Drugs (Milk, Dairies and Artificial Cream, Act), 1950, by which Area No. 5 (comprising Chichester, Worthing and District) would be made a "specified area" i.e., one in which the retail sale of milk other than "specially designated" milk would be illegal. (This Order came into force on 1st April, 1954). As regards the City, the Order will involve no change in the present procedure as no ungraded milk is now sold.

All milk sold in the City is retailed in bottles which have previously been washed and sterilised in the latest mechanical washers and the bottles subsequently fitted with overlapping aluminium foil caps.

Almost the whole of the milk sold in the City is pasteurised and the remainder, which is sold raw, is from tuberculin-tested herds and bottled at the farm of production. The supplies of Tuberculin-tested milk which are not bottled at the farm are pasteurised before sale and sold under the special designation Tuberculin-Tested (Pasteurised).

Milk and Dairies Regulations 1949 (Section 20): This regulation enables action to be taken when the Medical Officer of Health has evidence, or reasonable grounds for suspecting, that the supply of milk from registered premises is infected with disease communicable to man. No action was necessary during the year 1953.

Quality.—The West Sussex County Council are the Food and Drugs Authority for the City of Chichester, under the Food and Drugs Act, 1938. Samples of milk are taken by their sampling officers and submitted to the Public Analyst for determining the nature, substance and quality.

Cleanliness.—For ascertaining the cleanliness and the keeping quality of milk, samples are submitted to the “methylene blue” test.

Pasteurisation.—Samples of Pasteurised Milk are subjected to a Phosphatase Test. By means of this test it is possible to ascertain whether the milk has been heated to the temperature necessary to destroy all pathogenic organisms. It also proves that no raw milk has been subsequently mixed with the milk.

Biological Sampling of Milk.

During the year, 86 biological samples of milk (ungraded or accredited) were taken at the processing plant in the City, prior to heat treatment. These were examined for the presence of tubercle bacilli and brucella abortus. The results are given below.

Licences.—The City Council has the responsibility of supervising the distribution of milk within the City and the dealers are licensed by the City Council, the licences expiring at 31st December, in each year. Milk Pasteurising plants are the responsibility of the Food and Drugs Authority, the West Sussex County Council, and the Ministry of Agriculture and Fisheries has the responsibility for the licensing, and the supervision of farms at which milk is produced.

The following licences were granted by the City Council during the year 1953 :—

The Milk (Special Designation) (Raw Milk) Regulations, 1949—1950.

Premises Licensed for retailing “Tuberculin Tested” Milk (expiring 31st December, 1954)
---	-----	-----	-----	-----	-----

The Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949—1953.

Premises Licensed for retailing “Pasteurised” Milk (expiring 31st December, 1954)
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RESULT OF EXAMINATION OF MILK SAMPLES.

A total of 281 samples of milk were collected and submitted for examination during the year ; 179 samples were subjected to the Methylene Blue and Phosphatase Tests and were reported by the Pathologist to be satisfactory. Details are given below :—

No. of samples examined	Methylene Blue Test				Phosphatase Test			
	Pasteurised.	Tuberculin-Tested (Past.)	Channel Island (Past.)	School Milk (Past.)	Pasteurised	Tuberculin-Tested (Past.)	Channel Island (Past.)	School Milk (Past.)
179	45	46	45	43	45	46	45	43

Eighty-eight samples of milk were subjected to biological examination, as under :—

No. of samples examined.	Positive for Tubercle Bacilli.	Positive for Brucella Abortus.	Negative (both tests)	% Positive :	
				T.B.	B.A.
88	2	4	81 (1 test void)	2.27	4.54

The remaining 14 samples were of raw milk and were submitted to the Methylene Blue Test. All were reported to be satisfactory.

MEAT.

The Chief Sanitary Inspector is the Officer appointed under the Public Health (Meat) Regulations, 1924-1952.

Arrangements for the distribution of meat and slaughtering, for not only the City, but the adjacent areas and the Channel Islands, have continued to be concentrated in the City of Chichester.

No private slaughterhouses were in use in the City, all slaughtering being carried out at the two Ministry of Food-requisitioned slaughterhouses (at Stockbridge Road and Green Lane). All animals were inspected before slaughter and if necessary veterinary advice was sought. After slaughter all carcasses were inspected before distribution.

Slaughter of Animals Act, 1933.

All animals were slaughtered with the aid of mechanically-operated humane instruments. Licences, expiring on the 31st December, are issued annually by the City Council to approved slaughtermen and during the year under review 20 existing licences were renewed and 1 new licence was granted.

The total number of animals slaughtered during the year 1953 was 28,176, made up as follows :—

Slaughterhouse	Cattle (excluding Cows)	Cows	Calves	Sheep and Lambs	Pigs	Total
Stockbridge Road	4,754	1,171	1,811	4,521	110	12,367
Green Lane	—	—	867	8,318	6,624	15,809
TOTAL	4,754	1,171	2,678	12,839	6,734	28,176

This total shews an increase in the number of animals slaughtered of over 4,000 compared with the previous year.

CARCASES INSPECTED AND CONDEMNED

	Cattle (excluding Cows)	Cows	Calves	Sheep and Lambs	Pigs
Number killed	4,754	1,171	2,678	12,839	6,734
Number inspected	4,754	1,171	2,678	12,839	6,734
<i>All diseases except Tuberculosis</i>					
Whole carcasses condemned	4	6	1	33	18
Carcasses of which some part or organ was condemned ...	893	257	4	372	118
Percentage of the number inspected affected with disease other than Tuberculosis	18.87%	22.46%	0.19%	3.15%	2.01%
<i>Tuberculosis only</i>					
Whole carcasses condemned	11	14	1	—	12
Carcasses of which some part or organ was condemned ...	176	117	—	—	72
Percentage of the number inspected affected with Tuberculosis	3.93%	11.19%	0.04%	—	1.25%

Total amount of meat found to be diseased and destroyed, 37 tons, 16 cwt 1 qrs., 1 lb., comprised as follows :—

	Entire Carcasses				Joints				Edible Offal			
	tons.	cwts.	qrs.	lb.	tons.	cwts.	qrs.	lb.	tons.	cwts.	qrs.	lb.
Cattle (excluding cows)	3	11	0	20	—	18	2	17	11	2	0	15
Cows	4	10	1	12	1	5	3	20	10	15	3	1
Calves	—	—	3	8	—	—	—	—	—	—	3	6
Sheep and Lambs	—	10	3	1	—	—	1	17	—	13	2	4½
Pigs	1	19	0	3	—	4	1	1	2	2	2	15½
TOTAL ...	10	12	0	16	2	9	0	27	24	14	3	14

CLEAN FOOD CAMPAIGN.

(a) Food Preparing Premises.

Much attention was directed during the year to the conditions under which food was prepared for sale in bakehouses, restaurants and hotel kitchens, food factories and butchers' shops.

The need for scrupulous cleanliness at all times has been brought to the notice of the persons concerned and every effort has been made to facilitate this by the provision of constant hot and cold water, clean towels, wash basins and proper sanitary and toilet facilities.

In the main the efforts to improve the conditions under which food has been prepared have been most encouraging.

(b) Retail Food Shops (including Stalls and Vehicles)

The conditions under which food has been offered for sale during the year under review have maintained a high standard and it is pleasing to note that a number of shop-keepers are making use of refrigerated display cabinets for the sale of perishable food stuffs. These cabinets not only solve the fly problem but also protect the food from surface contamination, besides maintaining it in perfect condition.

(c) Statistics and general information.

In accordance with paragraph 7 of the Ministry of Health Circular 1/54, the following details are given concerning food premises, etc., in the City :—

(i) Food premises classified by types :—

Bakehouses	...	...	14
Bakers and confectioners			30
Butchers	...	...	16
Cafes and restaurants	...		19
Dairies	...	...	3
Fish shops	...	...	9 (including 5 fish-frying premises)
Factories (manufacture of preserved food)	...	...	1
Greengrocers	...	...	13
Grocery and provisions	...		63
Ice-cream	...	...	56
Licensed premises	...		67

(ii) Registered food premises :—

(a) Under section 92, Chichester Corporation Act, 1938.

Preparation or manufacture of sausages, preserved, potted, etc., meat	...	...	17
Manufacture and/or sale and storage of ice-cream			54

(b) Under section 8, Milk and Dairies Regulations, 1949.

Dairies	...	...	...	...	3
Distributors	...	...	...	...	3 (1 wholesale) (2 retail)

(iii) Inspections of registered food premises were carried out during the year as under :—

Manufacture of sausages, potted or preserved food	...	...	...	...	91
Dairies	...	...	...	...	36
Ice-cream manufacture, storage and sale					63

(iv) *Educational activity.*

During the year, staffing difficulties made it impracticable to undertake any new activities in the form of food hygiene lectures, etc. Regular routine inspections of food premises, however, afforded ample opportunity for discussions on all aspects of food hygiene with local tradesmen who have invariably shown themselves ready and willing to co-operate with the department in the maintenance of a high standard at their premises. Advice has been given where necessary and no difficulty experienced in securing compliance, where measures aimed at improving any unsatisfactory conditions have been suggested.

(v) *Disposal of condemned food.*

All condemned food is disposed of under the Department's supervision, at the Council's Refuse Tip.

(vi) *Special examination of foodstuffs.*

There were no cases during the year where special examination of a stock or consignment of food was found necessary as the result of the condemnation of unsound foodstuffs.

Other details concerning visits to food premises and the condemnation of foodstuffs are set out on subsequent pages of this Report.

ICE-CREAM.

At 31st December, 1953, the premises registered for the sale and/or manufacture of ice cream were as follows :—

Manufacture only	...	...	...	1
Manufacture and Sale	...	...	...	3
Storage only	...	...	...	1
Sale only, of wrapped ice cream	...	...	...	37
Sale only (no restrictions as to wrapping)	...	...	...	12
				—
				54
				—

There are now only two manufacturers in the City who regularly make ice cream and in each case a complete 'Cold Mix' is used.

The stringent requirements of the Ice-Cream (Heat Treatment, etc.) Regulations make the manufacture of ice-cream by small producers an uneconomical proposition. Nearly all the ice-cream sold in the City is prepacked and produced by large manufacturing wholesalers.

During the year 33 samples of ice cream were taken and these were subjected to the Methylene Blue reduction test and graded as to the bacteriological cleanliness in accordance with the method recommended by the Ministry of Health and Public Health Laboratory Service.

The following table gives the results of samples taken :—

Number of Samples	Grade 1	Grade 2	Grade 3	Grade 4
33	17	10	4	2

In explanation of the above table it is suggested that if, out of the four grades recommended, ice cream consistently fails to reach Grades 1 and 2, it would be reasonable to regard this as indicating defects of manufacture, or of handling, which call for further investigation.

The results of the examinations were, in every case communicated to the persons concerned. Numerous visits were made to the premises in which the ice cream was manufactured and the methods employed were thoroughly examined and advice given where appropriate. When an unsatisfactory result was received a thorough investigation was carried out and every endeavour was made to ascertain and rectify the fault in manufacture, storage or sale.

SECTION VI.

SANITARY CIRCUMSTANCES OF THE AREA

1. WATER SUPPLY.

(i) SOURCES OF SUPPLY, TREATMENT AND SAMPLING RESULTS.

The water supplied to the City during the year 1953 has been very satisfactory both in quality and quantity and there is no tendency towards plumbo-solvent action.

The water supplied by the Corporation is derived from wells and boreholes at Fishbourne and Funtington respectively. Apart from the supply of water to premises in the City area, water is also supplied by public mains to a number of parishes in the Chichester Rural District, and in bulk to the Selsey Water Company, for distribution by that undertaking.

An improved method of treatment consisting of super-chlorination followed by partial dechlorination was introduced at Fishbourne Pumping Station on 11th December, 1953.

Details of samples taken during the year, as furnished by the Water Engineer and Manager, Mr. A. N. Burgess, are appended below.

Funtington Source.

Twenty-five samples of Funtington raw water were submitted for bacteriological examination. Organisms of the coli-aerogenes group were present in very small number in two samples; which, however, did not contain *Bacillus Coli*.

One sample of raw water taken for chemical analysis had a total hardness of 220 p.p.m., of which 25 parts were non-carbonate or permanent hardness. The sample was practically clear and bright in appearance, neutral in reaction, free from metals apart from a negligible trace of iron, and contained no excess of salinity or mineral constituents in solution.

Fishbourne Source

Twenty-six samples of Fishbourne raw water were submitted for bacteriological examination. Organisms of the coli-aerogenes group were present in fourteen samples, eleven of which contained *Bacillus Coli*, Type 1.

One sample of raw water taken for chemical analysis had a total hardness of 250 p.p.m., of which 40 parts were non-carbonate or permanent hardness. The sample was practically clear and bright in appearance, neutral in reaction free from metals apart from a negligible trace of iron, and contained no excess of salinity or mineral constituents in solution.

Tap Water

The raw water undergoes *a continuous process of purification before distribution* by the addition of appropriate quantities of chlorine and ammonia at the Waterworks.

Twenty-five samples of treated water from consumers' premises (thirteen in the City and twelve in the Rural District) and twenty-six samples from the Fishbourne delivery main were submitted for bacteriological examination. Organisms of the coli-aerogenes group were present in two samples collected. The Analysts reported that the water *as supplied* was wholesome in character and suitable for drinking and domestic purposes.

One sample of tap water taken for chemical analysis had similar characteristics to the raw water samples and it was described by the Analysts as being *of the highest standard of organic purity*.

(ii) STAFF.

All workmen employed in the Water Department are submitted to the appropriate medical tests at the time of engagement, and annually thereafter.

(iii) HOUSES AND POPULATION SUPPLIED FROM THE PUBLIC WATER MAINS.

During the year, 370 premises were connected to the public water mains, 155 being in the City area and 215 in Chichester Rural District.

The number of dwelling houses in the City, and the population supplied from the public water mains and privately supplied, is as follows :—

Supply	No. of inhabited dwelling houses	Estimated Population
(a) Public water mains—direct to houses ...	5,285	19,250
(b) Public water mains—by means of stand pipes	—	—
(c) Balance privately supplied	8	30
Total	5,293	19,280

(iv) HOUSES NOT ON MAINS SUPPLY OF WATER.

10 samples of water were taken during the year from houses not connected to the public water supply and warning letters were sent to the occupiers from which unsatisfactory samples were taken.

There is very little prospect of providing these isolated premises with a piped supply of town's water until the public mains are extended to their respective areas.

2. DRAINAGE AND SEWERAGE.

Chichester is drained as far as possible on the separate system of main drainage (i.e. rain water is drained separately from soil water) the Sewage Disposal Works being situated at Apuldram, $2\frac{1}{2}$ miles to the South West from Chichester Cross.

3. CLOSET ACCOMMODATION.

Water closets form the chief method of disposal.

There are at the moment approximately 150 houses within the City boundary with cesspool drainage.

4. PUBLIC CLEANSING.

Scavenging is carried out daily in the main streets. House refuse is collected weekly by the Corporation and taken to the refuse tip situated on the outskirts of the City.

The City Council has a modern cesspool emptying vehicle for service in the City and the contents are disposed of at the Sewage Works. Cesspools are emptied on application.

5. PUBLIC BATHS.

It was stated in my report for 1951 that the scheme for erection of Slipper Baths (3 male and 3 female) on a site at the junction of Alexandra Terrace and St. Pancras had unfortunately to be deferred in view of the restrictions by the Government on all building other than housing. Early in 1953 a fresh approach for Ministerial sanction for the scheme resulted in a favourable reply from the Ministry of Housing and Local Government. Steps were accordingly taken to proceed with the preliminary arrangements but, after careful consideration of the running costs (in this respect, guidance was obtained from information supplied by other authorities operating such a service) and particularly of the estimated amount to be found from the General Rate Fund each year, together with the probably diminishing use of the Slipper Baths as more new houses (with baths) were provided, the Council reluctantly decided not to proceed further with the proposal.

6. SMOKE ABATEMENT.

Several complaints were received, mostly of a minor character, the cause was almost exclusively due to the allocation of grades of fuel for which the apparatus was not designed. Fifteen inspections were made during the year in connection with smoke nuisances.

7. CAMPING SITES AND MOVABLE DWELLINGS.

There are no camping sites in the City licensed for regular use. During the year, 4 applications for licences under section 269, Public Health Act, 1936, were received, 2 in respect of individual sites and 2 for the vehicles to be stationed thereon. Two applications were granted, the other being refused and steps were taken to secure the removal of the unauthorised vehicle from the site in question. Nine visits were made in connection with these applications.

8. OFFENSIVE TRADES.

The offensive trades in the City include :—

One Fellmonger.

Three Rag and Bone dealers.

No nuisances were reported regarding these trades.

9. SHOPS.

Routine inspections are carried out by the Additional Sanitary Inspector and the Shops' Inspector (part-time), working under the supervision of the Chief Officers of the department.

10. DOMESTIC SERVANTS REGISTRY OFFICES.

There are two Domestic Servants Registry Offices in the City and 7 visits were made during the year under review. No complaints were received.

11. HOUSES LET IN LODGINGS.

There are no houses let in lodgings registered in the district.

12. COMMON LODGING HOUSES.

There is one Common Lodging House in the City with accommodation for 24 beds. Periodical routine visits were made to the premises during the year.

13. PUBLIC MORTUARY.

A Public Mortuary situated in Spitalfield Lane is maintained by the Corporation and facilities are available for the holding of post mortem examinations.

An agreement exists between the Corporation and the Chichester Rural District Council for the reception of bodies from their area.

During the year 1953, 49 bodies were admitted as follows :—

	Reason for admission		Total
	Awaiting Burial	Post Mortem	
Chichester City	4	16	20
Chichester R.D.C.	10	19	29
Total	14	35	49

14. BYE-LAWS.

List of Bye-Laws in force in the City which relate to Public Health :—

Number	Description	Date of Confirmation
1	New Streets and Buildings	April, 1936
2	Common Lodging Houses	May, 1936
3	Markets	May, 1936
4	Mortuary	May, 1936
5	Nuisances	May, 1936
6	Offensive Trades	May, 1936
7	Slaughterhouses	May, 1936
8	Sanitary Conveniences	June, 1936
9	Dogs fouling footway	October, 1936
10	Houses let in lodgings	June, 1937
11	Buildings	February, 1939
12	Pleasure Fairs	February, 1939
13	Houses let in lodgings	May, 1939
14	Refuse Tips	October, 1939
15	Water—Prevention of waste, Undue consumption, Misuse or Contamination	March, 1950
16	Handling, Wrapping and Delivery of Food and Sale of Food in the Open Air	July, 1950
17	Buildings	October, 1953

SANITARY INSPECTION OF THE AREA.

The following is a summary of the visits and inspections, etc., carried out by the Chief Sanitary Inspector and his Assistants during the year :

1. PUBLIC HEALTH AND HOUSING ACTS.

No. of complaints received	...	...	...	230
Inspections and re-inspections	945

2. HOUSING MANAGEMENT.

Visits (Housing Application)	293
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3. FACTORIES ACT.

Factories	185
Bakehouses	18

4. MILK AND DAIRIES.

Dairies	36
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5. FOODSTUFFS.

Ice Cream Vendors and Manufacturers	63
Ice Cream sampling	33
Examination of unsound food	...	...	...	204

The following unsound food was condemned during 1952 :—

Cake	...	...	96 Swiss Rolls	Flour	...	...	1 lb.
Cake or pudding mixture	3	packets		Fruit—Dried	...	...	3 packets
Cereals	...	...	23 packets	Fruit—Tinned	...	...	1,978 tins
Cheese	...	...	819 boxes and	Ham	...	...	3 cwts. 5 lb. 11 ozs.
	...	...	14½ lbs. loose	Jam, Marmalade, etc.	...	...	147 tins and jars
Cordials, etc.	...	...	35 botts. and tins	Jellies	...	...	6 packets
Chocolates, Sweets	...	...	3½ lb.	Maws	...	...	17 cwts. 72½ lb.
Ducks	...	...	10	Meat—Tinned (various)	...	...	320 tins
Eggs	...	...	6 dozen	Milk—Tinned	...	...	264 tins
Fish—Dry :—				Paste	...	...	2 tins
Kippers	...	...	1 stone	Pickles and Sauces	...	...	9 botts. and jars
Fish—Wet :—				Sausages	...	...	176 lb. 14 ozs.
Escallops	...	...	195	Soups	...	...	52 tins
Prawns	...	...	3 st. 3 lb.	Spaghetti	...	...	9 tins
Fish—Tinned	...	...	143 tins	Vegetables—Tinned	...	...	713 tins

Summary of visits and inspections etc., carried out by the Chief Sanitary Inspector and his Assistants (continued) :

6. MEAT.

Government Slaughterhouses	...	...	...	405
Butchers' Shops	...	...	...	42

The following unsound food was condemned at Butchers' Shops :—

Beef—Home killed	...	1,233½ lb.	Pork—Home killed	...	918 lb.
Mutton—Home killed	...	816½ lb.	Pork—Imported	...	91 lb.
Mutton—Imported	...	14½ lb.	Ox Tongue Roots...	...	50 lb.
			Ox Livers	...	35 lb.

7. SHOP ACTS.

Visits	572
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8. EMPLOYMENT OF YOUNG PERSONS' ACTS.

Visits	300
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9. WATER SUPPLY.

Water Sampling	10
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10. OFFENSIVE TRADES.

Inspections	10
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11. INFECTIOUS DISEASE

General Visits	14
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12. LICENSED PREMISES.

Inspections	63
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13. RODENT CONTROL.**(a) Surface Infestations :—**

(i) Number of inspections of premises carried out following notification or for survey purposes	...	244
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(ii) Number of inspections made of business premises for rodent infestation during routine visits made under Food & Drugs Acts, Factories Acts., etc.	478
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(iii) Number of infestations dealt with :—

(a) At private dwellinghouses	...	128
(b) At business premises	...	16
(c) At Corporation property	...	10

Total number of treatments carried out	...	154
--	-----	-----

(b) Sewer Treatment :—

Number of treatments (including 10% annual test)	3
Number of manholes baited	41
Number shewing pre-bait takes	8
(These were satisfactorily dealt with)	

14. DISINFECTION AND DISINFESTATION.**Number of Disinfection Treatments carried out :—**

After infectious disease	...	12
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Number of Disinfestation Treatments carried out :—**(a) Bed Bugs.**

(i) Council Houses	...	1
(ii) Other premises	...	1

Total	2
-------	---

(b) Other Vermin.

(i) Council houses	...	4
(ii) Other premises	...	29

Total	33
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FACTORIES ACTS, 1937 and 1948

Number of premises on register :—

Factories with power	100
Factories—non-power	...	...	...	57
Other premises	...	...	...	54
				<hr/> 211 <hr/>

INSPECTIONS

Premises	Number of		
	Inspections	Written Notices	Occupiers Prosecuted
Factories with mechanical power ...	123	—	—
Factories without mechanical power ...	95	—	—
Other premises under the Act (including works of building and engineering construction but not including out-workers' premises) ...	62	—	—
TOTAL ...	280	—	—

DEFECTS FOUND

Particulars	Number of defects				Number of defects in respect of which Prosecutions were Instituted
	Found	Remedied	To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1) ...	2	2	—	—	—
Overcrowding (S.2) ...	—	—	—	—	—
Unreasonable temperature (S.3) ...	1	1	—	—	—
Inadequate ventilation (S.4) ...	—	—	—	—	—
Ineffective drainage of floors (S.6) ...	—	—	—	—	—
Sanitary Conveniences (S.7) :					
(a) Insufficient ...	2	2	—	—	—
(b) Unsuitable or defective ...	3	3	—	—	—
(c) Not separate for sexes ...	—	—	—	—	—
Other offences (not including offences relating to Home-work) ...	—	—	—	—	—
TOTAL ...	8	8	—	—	—

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